

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007 08:00 AM
Secretary of State

DOCUMENT # P96000028796
 1. Entity Name
C. MANN ASSOCIATES, INC.



Principal Place of Business 6305 NW 58TH WAY PARKLAND, FL 33067	Mailing Address 6305 NW 58TH WAY PARKLAND, FL 33067
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DO NOT WRITE IN THIS SPACE



04112007 No Chg-P CR2E034 (11/05)

4. FEI Number 22-2766670	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 ICHEL, CHERYL
 6305 NW 58TH WAY
 PARKLAND, FL 33067

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ICHEL, MARVIN M 6305 NW 58TH WAY PARKLAND, FL 33067
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ICHEL, CHERYL M 6305 NW 58TH WAY PARKLAND, FL 33067
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 04/26/07-80104-018 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Cheryl M. Ichel (Cheryl M. Ichel) 954-341-7773
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date: 4/10/07 Daytime Phone #