## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000028937

Entity Name: ALDRICH & ASSOCIATES OF ORMOND BEACH, INC.

FILED Apr 30, 2006 Secretary of State

Current Principal Place of Business:			New Principal P	New Principal Place of Business:	
1474 W GF SUITE 485	RANADA BLVE	)			
	BCH, FL 3217	74 US			
Current Mailing Address:			New Mailing Ad	New Mailing Address:	
	RANADA BLVE				
SUITE 485 ORMOND	BCH, FL 3217	74 US			
FEI Number:	59-3373259	FEI Number Applied For ( )	FEI Number Not Applicable (	) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
4 OLD KIN PALM COA	TO, MICHAEL GS ROAD NOI AST, FL 32137	RTH ′US			
	named entity s of Florida.	submits this statement for the p	ourpose of changing its regi	stered office or registered agent, or both,	
SIGNATUF	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Can	npaign Financing	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CH	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () ALDRICH, SAND 28 SEA VISTA D PALM COAST, F	OR .	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () ALDRICH, MELI 3648 GALWAY ORMOND BCH,	LN	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () ALDRICH, TODI 3648 GALWAY ORMOND BCH,	LN	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	()	Delete	Address: 3648	( ) Change (X) Addition AN, AIMEE M GALWAY LN DND BEACH, FL 32174	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TODD ALDRICH D 04/30/2006