2006 FOR PROFIT CORPORATION

Jan 23, 2006 8:00 am **ANNUAL REPORT Secretary of State** DOCUMENT # P96000044614 01-23-2006 90052 024 ***150.00 1. Entity Name P.M. FAMILY CORP. Principal Place of Business Mailing Address 100 JIM MORAN BLVD P O BOX 4007 DEERFIELD BEACH, FL 33442 DEERFIELD BEACH, FL 33442 No Chg-P 01042006 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0667568 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BLANTON, THOMAS DO NOT WRITE 185 JIM MORAN BLVD DEERFIELD BEACH, FL 33442 IN THIS SPACE 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. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE MORAN, PATRICIA G NAME STREET ADDRESS 100 JIM MORAN BLVD DEERFIELD BEACH, FL 33442 CITY-ST-ZIP TITLE NAME COYLE, CHRISTINE B STREET ADDRESS 100 JIM MORAN BLVD CITY-ST-ZIP DEERFIELD BEACH, FL 33442 TITLE BEDDIA, THOMAS NAME STREET ADDRESS 100 JIM MORAN BLVD DO NOT WRITE CITY-ST-ZIP DEERFIELD BEACH, FL 33442 TITLE IN THIS SPACE BEDDIA, DONALD NAME STREET ADDRESS 100 JIM MORAN BLVD CITY-SF-ZIP DEERFIELD BEACH, FL 33442 TITLE BLANTON, THOMAS K NAME STREET ADDRESS 100 JIM MORAN BLVD CITY-ST-ZIP DEERFIELD BEACH, FL 33442 TITLE STREET ADDRESS

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.

CITY-ST-ZIP

THOMAS K. BLANTON SECRETARY

954-429-2566

FILED