2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

May 30, 2006 8:00 am Secretary of State DOCUMENT # P96000083292 05-30-2006 90038 031 ***150.00 1. Entity Name MICHAEL C. BOEHM & ASSOCIATES, INC. Principal Place of Business Mailing Address 40099320 209 OCEAN AVE 209 OCEAN AVE SUITE A SUITE A MELBOURNE BEACH, FL 32951 MELBOURNE BEACH, FL 32951 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 05192006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 59-3275633 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RICHEY, JAMES HESQ Street Address (P.O. Box Number is Not Acceptable) 200 SOUTH HARBOR CITY BLVD. SUITE 201 MELBOURNE, FL 32901 Zip Code 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaiga Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Due by September 6, 2006 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Change ☐ Addition TITI F ☐ Delete BOEHM, MICHAEL C NAME NAME STREET ADDRESS 5601 BEACH ELDER WAY STREET ADDRESS MELBOURNE BEACH, FL 32951 CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE Delete TITLE NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

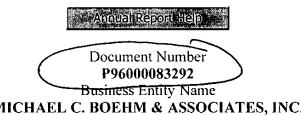
FILED

ATTACHMENT HUGG4520



Division of Corporations

Annual Report



MICHAEL C. BOEHM & ASSOCIATES, INC.		
FEI Number	593275633	
FEI Number Status	€ Listed Above ← Applied For ← Not Applicable	
Certificate of Status Desired	C Yes © No \$8.75 each	
Election Campaign Financing Trust Fund	d Contribution C Yes 6 No	
Pri	ncipal Place of Business	
Address	209 OCEAN AVE	
Suite, Apt. #, etc.	SUITE A	
City, State	MELBOURNE BEACH , FL	
Zip Code & Country	32951	
Mailing Address		
Address	209 OCEAN AVE	
Suite, Apt. #, etc.	SUITE A	
City, State	MELBOURNE BEACH , FL	
Zip Code & Country		
Name and Address of Registered Agent		
Name (Last, First, Middle, Title)	RICHEY ,JAMES ,H ,ESQ	
- OR -		
Business to serve as RA		
Address (PO Box is not acceptable	707 West Eau Gallie Blvd.	
Suite, Apt. #. etc.		
City, State	MELBOURNE , FL	

If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of

US

32935

Zip Code & Country

Division of Corporations .

ATTACHMENT 40054520

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registered agent. RA signature must be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes.

Officer/Director Name and Address

Our database can hold up to 6 officers/directors. If more than 6 officers/directors need to be made a part of the record, you cannot file the annual report online. You will need to download an annual report and list the additional officers/directors, title(s). name, and address on an attachment.

Title	D
Name (Last, First, Middle, Title)	BOEHM ,MICHAEL ,C ,
- OR -	
Entity Name to serve as Officer/Director	· .
Street Address	5601 BEACH ELDER WAY
City, State	MELBOURNE BEACH , FL
Zip Code & Country	32951
Title	
Name (Last, First, Middle, Title)	, , , ,
- OR -	
Entity Name to serve as Officer/Director	
Street Address	
City, State	
Zip Code & Country	
Title	
Name (Last, First, Middle, Title)	, , , , , , , , , , , , , , , , , , , ,
- OR -	
Entity Name to serve as Officer/Director	
Street Address	
City, State	,
Zip Code & Country	

Division of Corporations	ATTACHMENT 40094520 Page 3 of 4
Title	#P960000 83292
Name (Last, First, Middle, Title)	
- OR - Entity Name to serve as Officer/Director	
Street Address	
City, State	
Zip Code & Country	
Title	
Name (Last, First, Middle, Title)	
- OR -	
Entity Name to serve as Officer/Director	
Street Address	
City, State	,
Zip Code & Country	
Title	
Name (Last, First, Middle, Title)	
- OR -	
Entity Name to serve as Officer/Director	
Street Address	
City, State	, , , , , , , , , , , , , , , , , , , ,
Zip Code & Country	
An individual named	above or an individual signing on behalf of an

entity named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title
Officer/Director Signature This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes. The individual "signing" this document affirms that the facts stated herein are true.

