

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90216 001 ***150.00

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1. Entity Name
 CLUB TEL, INC.



Principal Place of Business

14175 ICOT BLVD.
 STE. 100
 CLEARWATER, FL 33760 US

Mailing Address

14175 ICOT BLVD.
 STE. 100
 CLEARWATER, FL 33760 US

50014250



02082006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number	Applied For
59-3470044	Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, DANIEL P
 14175 ICOT BLVD.
 STE. 100
 CLEARWATER, FL 33760

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	JOHNSON, DANIEL P
STREET ADDRESS	14175 ICOT BLVD., STE. 100
CITY-ST-ZIP	CLEARWATER, FL 33760
TITLE	SD
NAME	REDMOND, JOHN C
STREET ADDRESS	14175 ICOT BLVD., STE. 100
CITY-ST-ZIP	CLEARWATER, FL 33760
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 reports 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: DAN JOHNSON 2-6-09 1175243900
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #