2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 13, 2006 8:00 am Secretary of State

1. Entity Nam	R CONNECTION NORTH, INC.				02-13-2006 90	0041 004 ***150).00	
Principal Plac 1842 N. TAN		Mailing Address 1842 N. TAMIAMI TRAIL						
N. FT.MYERS		N. FT.MYERS, FL 33917						
	Place of Business	3. Mailing Address						
5731 Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.						(80) IF ION	
井 牛 Çity & Ştatı	te City & State			02032006	Chg-P	CR2E034 (11/05)	plied For	
North			Nuers Fl	59-345	6511		t Applicable	
3391	6. Name and Address of Current	33917	Lée		of Status Desired Address of New Reg	Fee Requires	tional	
CHIDI EB		registered Agent	Name	7. Name and	Addiess of New Key	istalan Wäalit		
SHIDLER, JANET 1900 CLIFFORD ST. #707 FORT MYERS, FL 33901			Street Address	Strest Address (P.A. Box Number is Not Acceptable) 5/31 FOX I AKE Drive #4				
I OICI WIII	LNG, 1 E 33301				•			
B. The charge			City		Myers	FL Zip Code	916	
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								
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees								
10.	OFFICERS AND	DIRECTORS Delete	11.	ADDITIONS	CHANGES TO OFFICE	ERS AND DIRECTORS	S IN 11	
NAME	SHIDLER, JANET	□ Delete	NAME	721 Env	lake Driv	.	☐ Woothou	
STREET ADDRESS CITY-ST-ZIP	1842 N. TAMIAMI TRAIL N. FT.MYERS, FL 33917		STREET ADDRESS 5' CITY-ST-ZIP	Fort n	lyers Fl	33917		
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby indicated of the cor	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empr , or on an attachment with an address	Delete This filing does not qualify for tirrue and accurate and that my werend to execute this report as with all other like empowered.	NAME STREET ADDRESS CITY-ST-ZIP TILLE NAME STREET ADDRESS CITY-ST-ZIP TILLE NAME STREET ADDRESS CITY-ST-ZIP TOTAL NAME STREET ADDRESS CITY-ST-ZIP	e same legal effec 607, Florida Statute	ct as if made under oat es; and that my name a	☐ Change ☐ Change	Addition Addition	