


2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # P97000058816			
1. Name DOG INVESTMENTS, INC.			
2. Principal Place of Business PANAMA CITY BEACH PKWY PANAMA CITY BEACH FL 32407		3. Mailing Address 12007 PANAMA CITY BEACH PKWY PANAMA CITY BEACH FL 32407	
4. Principal Place of Business Apt. #, etc.		5. Mailing Address Suite, Apt. #, etc.	
6. State		City & State	
Country		Country	
7. Name and Address of Current Registered Agent FLETCHER, JESSE 3413 DRAGONS RIDGE RD. PO BOX 27607 PANAMA CITY FL 32411		8. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
9. 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 agree to the obligations of registered agent.			
10. Signature Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Check Payable to Florida Department of State		11. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Added to Fees	
OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
1. TITLE PVT FLETCHER, JESSE ADDRESS 2413 DRAGONS RIDGE RD CITY-STATE-ZIP PANAMA CITY FL 32411		TITLE NAME STREET ADDRESS CITY-STATE-ZIP 000000396823 01/30/06-80024-012 150.00	
2. TITLE Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP Change Add	
3. TITLE Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP Change Add	
4. TITLE Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP Change Add	
5. TITLE Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP Change Add	
6. TITLE Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP Change Add	

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jesse Fletcher* 1/19/06 850 527-270