

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000077405

FILED
Apr 26, 2006
Secretary of State

Entity Name: PROFESSIONAL COMMUNICATIONS CONSULTANTS, INC.

Current Principal Place of Business:

201 FLETCHER AVE
SARASOTA, FL 342376019 US

New Principal Place of Business:

Current Mailing Address:

201 FLETCHER AVE
SARASOTA, FL 342376019 US

New Mailing Address:

FEI Number: 65-0794081

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DU TREIL, LOUIS R SR
201 FLETCHER AVE
SARASOTA, FL 342376019 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DU TREIL, SR LOUIS R
Address: 8870 BLOOMFIELD BLVD
City-St-Zip: SARASOTA, FL 34238

Title: VP () Delete
Name: LUNDIN, JOHN A
Address: 4604 4TH AVENUE NE
City-St-Zip: BRADENTON, FL 34208

Title: ST () Delete
Name: RACKLEY, RONALD D
Address: 6521 WOOD POND DR
City-St-Zip: BRADENTON, FL 34202

Title: VP () Delete
Name: DICKMANN, DAVID E
Address: 3291 49TH STREET
City-St-Zip: SARASOTA, FL 34235

Title: VP () Delete
Name: DUTREIL, LOUIS R JR.
Address: 4754 WATERMARK LANE
City-St-Zip: SARASOTA, FL 34238

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN A. LUNDIN

VP

04/26/2006

Electronic Signature of Signing Officer or Director

_____ Date