

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000083795

FILED
Apr 15, 2006
Secretary of State

Entity Name: AMBROSE FOODS & SERVICES, INC.

Current Principal Place of Business:

264 S HARBOR DR
HOLMES BEACH, FL 34217

New Principal Place of Business:

Current Mailing Address:

264 S HARBOR DR
HOLMES BEACH, FL 34217

New Mailing Address:

FEI Number: 65-0788901

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMBROSE, DAVID A
264 S HARBOR DR
HOLMES BEACH, FL 34217 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: PS () Delete
Name: AMBROSE, NANCY
Address: 264 S HARBOR DR
City-St-Zip: HOLMES BCH, FL 34217

Title: VPT () Delete
Name: AMBROSE, DAVID A
Address: 264 S HARBOR DR
City-St-Zip: HOLMES BCH, FL 34217

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: DAVID A. AMBROSE

VP

04/15/2006

Electronic Signature of Signing Officer or Director

_____ Date