

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90034 018 ***150.00

DOCUMENT # P97000092379 1. Entity Name DAVID G.S. TAYLOR, INC.			
Principal Place of Business 7898 U.S. HIGHWAY 19 NORTH PINELLAS PARK, FL 33781		Mailing Address 7898 U.S. HIGHWAY 19 NORTH PINELLAS PARK, FL 33781	
2. Principal Place of Business 7893 Sailboat Key Blvd		Mailing Address 7893 Sailboat Key Blvd	
Suite, Apt. #, etc. Apt 202		Suite, Apt. #, etc. Apt 202	
City & State South Pasadena, FL		City & State South Pasadena, FL	
Zip 33707-4321		Zip 33707-4321	
Country US		Country US	
6. Name and Address of Current Registered Agent TAYLOR, DAVID G 7998 U.S. HIGHWAY 19 NORTH PINELLAS PARK, FL 33781		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 7893 Sailboat Key Blvd, Apt 202 South Pasadena, FL City FL Zip Code 33707-4321	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	NAME TAYLOR, DAVID G. S.	<input type="checkbox"/> Delete	
STREET ADDRESS 7893 SAILBOAT KEY #202	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY-ST-ZIP SO PASADENA, FL 33709	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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 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 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: David G.S. Taylor		President 1/20/06	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	