## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **Secretary of State DOCUMENT # P98000003663** 01-09-2006 90030 018 \*\*\*150.00 1. Entity Name FAM HOLDINGS, INC. Principal Place of Business Mailing Address 16000133 300 INTERNATIONAL PARKWAY 300 INTERNATIONAL PARKWAY SUITE 270 SUITE 270 HEATHROW, FL 32746 HEATHROW, FL 32746 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01052006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 59-3488447 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent F. Andrew Moran MORAN, F. ANDREW Street Address (P.O. Box Number is Not Acceptable) SEE ADDRESS CHANGE 300 INTERNATIONAL PKWY. **SUITE 270** 11491 N.E. 72nd Boulevard HEATHROW, FL 32746 Lady Lake 8. The above name entity suprimite 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 red energy and the 4 enginesties (NOTE: Registered Agent signisture required when renstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Delete TITLE ☐ Change ☐ Addition NAME MORAN, F. ANDREW NAME STREET ADDRESS 300 INTERNATIONAL PARKWAY SUITE 270 STREET ADDRESS CITY-ST-ZIP HEATHROW, FL 32746 CITY-ST-7IP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITI F ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITE F ☐ Delete TITE F ☐ Change ■ Addition MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Detete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITI F Change ■ Addition NAME : NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SIGNATURE:

OFFI HAME OF SIGNING OFFICER OF DIRECTOR

FILED

Jan 09, 2006 8:00 am