

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 25, 2006 08:00 AM  
Secretary of State

DOCUMENT # P98000009701

1. Entity Name  
PHILLIPS STORES, INC.



Principal Place of Business  
1500 BANNERMAN RD  
TALLAHASSEE, FL 32312

Mailing Address  
878 BURNT LEAF LANE  
TALLAHASSEE, FL 32310



04122006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

|   |                                |
|---|--------------------------------|
| 4. FEI Number<br>59-3495342                               | Applied For<br>Not Applicable  |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

PHILLIPS, GWYN  
878 BURNT LEAF LANE  
TALLAHASSEE, FL 32310

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IN THIS SPACE

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

U00000533396  
05/06/06 00121 022 150.00

10. OFFICERS AND DIRECTORS

|  |   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | P<br>PHILLIPS, GWYN<br>878 BURNT LEAF LANE<br>TALLAHASSEE, FL 32310 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
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| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |

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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 Gwyn D Phillips Gwyn D Phillips 4/12/06 850-894-9912  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #