


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 11, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000033207		
1. Entity Name LAYIN' FLORZ, INC.		
Principal Place of Business 8716 SANDBERRY BLVD. ORLANDO, FL 32819	Mailing Address 8716 SANDBERRY BLVD. ORLANDO, FL 32819	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent DURHAM, CALVIN M JR 8716 SANDBERRY BLVD. ORLANDO, FL 32819		DO NOT WRITE 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD DURHAM, CALVIN JR 8716 SANDBERRY BLVD. ORLANDO, FL 32819	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DURHAM, LORRAINE M 8716 SANDBERRY BLVD. ORLANDO, FL 32819	
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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: <u><i>Calvin M Durham</i></u> <u><i>Lorraine M Durham</i></u> <u>7/5/06</u> <u>(407) 467-3313</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		



05052006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3502760	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

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05/20/06-80042-006 158.75