2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000050290

City-St-Zip:

VALRICO, FL 33594

Entity Name: FORRESTER-SMITH FULFILLMENT, INC

FILED Feb 15, 2006 Secretary of State

	mer renteer	EIN SIMITTY OEF IEEMENT, II			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
213 HOBB TAMPA, F	SS ST L 336198001				
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
213 HOBB TAMPA, F	3S ST L 336198001				
FEI Number:	: 59-3514932	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
128 WEST	R, JOHN W FROBERTSON N, FL 33511	STREET US			
	e named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
	Electroni	c Signature of Registered Age	ent	Date	
Election Car	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () HUGHES, H WIN 5306 PINE ROC LITHIA, FL 3354	KLAND	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () HELDRETH, JAN 6401 MARBELL APOLLO BEACH	A BLVD	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address:	ST () MOSHER, SUSA 3707 KINGSFOR		Title: (Name: Address:) Change () Addition	

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.

City-St-Zip:

SIGNATURE: H. WINGFIELD HUGHES P 02/15/2006