

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000075260

1. Entity Name
COM-TWO, INC.



Principal Place of Business
**5200 CENTRAL AVENUE
ST. PETERSBURG, FL 33707**

Mailing Address
**5200 CENTRAL AVENUE
ST. PETERSBURG, FL 33707**



02152006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3646174

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

Applied For
Not Applicable

6. Name and Address of Current Registered Agent

**GRAHAM, PETER D
5200 CENTRAL AVENUE
ST. PETERSBURG, FL 33707**

**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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) 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**

10. OFFICERS AND DIRECTORS

TITLE **D**
NAME **GRAHAM, PETER D**
STREET ADDRESS **5200 CENTRAL AVENUE**
CITY-ST-ZIP **ST. PETERSBURG, FL 33707**

TITLE **P**
NAME **CROSBY, HOWARD M**
STREET ADDRESS **1330 86 TERRACE NORTH**
CITY-ST-ZIP **ST PETERSBURG, FL 33302**

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IN THIS SPACE**

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 affidavit with all other like empowered.

SIGNATURE: Howard M Crosby **Howard M Crosby** 2/28/06 727-460-7712
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #