

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000089846

FILED  
Apr 18, 2006  
Secretary of State

**Entity Name:** MORGAN SPEICAL INVESTIGATIONS, INC.

**Current Principal Place of Business:**

9271 SANDLER ROAD  
JACKSONVILLE, FL 32222

**New Principal Place of Business:**

11865 PIKEVILLE COURT  
JACKSONVILLE, FL 32220

**Current Mailing Address:**

P.O. BOX 440824  
JACKSONVILLE, FL 32222

**New Mailing Address:**

**FEI Number:** 59-3538937      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MORGAN, RICKY WAYNE  
9271 SANDLER ROAD  
JACKSONVILLE, FL 32222      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MORGAN, RICKY  
Address: 9271 SANDLER RD  
City-St-Zip: JACKSONVILLE, FL 32222

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MORGAN, RICKY  
Address: 11865 PIKEVILLE COURT  
City-St-Zip: JACKSONVILLE, FL 32220

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.

SIGNATURE: RICKY WAYNE MORGAN

PRES

04/18/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date