2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000096714

1. Entity Name
CAWLEY-O'DELL ENTERPRISES, INC.

Principal Place of Business	Mailing Address
636 U.S. HIGHWAY ONE #113 NORTH PALM BEACH, FL 33408	636 U.S. HIGHWAY ONE #113 P.O. BOX 14445 NORTH PALM BEACH, FL 33408

DO NOT WRITE IN THIS SPACE

01052006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3550711
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CAWLEY, JEFFREY W
636 U.S. HIGHWAY ONE
SUITE 113
NORTH PALM BEACH, FL 33408

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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	TD
NAME	CAWLEY RHINE, GRACE
STREET ADDRESS	1578 EAGLE NEST CIR
CITY-ST-ZIP	WINTER SPRINGS, FL 32708
TITLE	PD
NAME	CAWLEY, JEFFREY
STREET ADDRESS	636 US HWY 1 STE 113
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408
TITLE	S
NAME	PRETI, JANNET
STREET ADDRESS	636 U.S. HIGHWAY ONE #113
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408
TITLE	VD
NAME	CAWLEY, LUCINDA L
STREET ADDRESS	1022 LANCASTER AVE
CITY-ST-ZIP	SYRACUSE, NY 13210
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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: Jeffrey W. Cawley 1/17/2006 Date 954 687-0511 Daytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR