

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000100650

1. Entity Name

TRAFALGAR SQUARE OF VERO BEACH, INC.



Principal Place of Business

6210 N A-1-A
INDIAN RIVER SHORES, FL 32963

Mailing Address

6210 N A-1-A
INDIAN RIVER SHORES, FL 32963

DO NOT WRITE IN THIS SPACE



04242006

No Chg-P

CR2E034 (11/05)

4. FEI Number

65-0881986

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GOULD, CHARLES H CPA
2127 10TH AVENUE
VERO BEACH, FL 32960

**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 reinstating)

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 HORSLEY, L. HERBERT
STREET ADDRESS 6210 N A-1-A
CITY-ST-ZIP INDIAN RIVER SHORES, FL 32963

TITLE D
NAME HORSLEY, EMELIE A
STREET ADDRESS 6210 N A-1-A
CITY-ST-ZIP INDIAN RIVER SHORES, FL 32963

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000000542912
05/10/06-80114-023 150.00

**DO NOT WRITE
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 address, with all other like empowered.

SIGNATURE: L. Herbert Horsley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/06

772-231-6506

Date

Daytime Phone #