

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2006 8:00 am
Secretary of State

02-06-2006 90054 037 ***150.00

DOCUMENT # P98000107226

1. Entity Name
DRIFTWOOD VENTURES, INC.



Principal Place of Business
**1001 N. U.S. HWY 1
SUITE 800
JUPITER, FL 33477**

Mailing Address
**1001 N. U.S. HWY 1
SUITE 800
JUPITER, FL 33477**

60011544



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01092006 Chg-P CR2E034 (11/05)

City & State

City & State

4. FEI Number

65-0895439

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WESSLER, ROBERT I
150 W FLAGLER STREET #2200
MIAMI, FL 33130**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 PD
NAME BUDEMMEYER, DAVID ☐ Delete
STREET ADDRESS 1001 N. US HWY 1, STE 800
CITY-ST-ZIP JUPITER, FL 33477

TITLE DVS
NAME DIAZ, CHARLES M ☐ Delete
STREET ADDRESS 1001 N. US HWY 1
CITY-ST-ZIP JUPITER, FL 33477

TITLE VT
NAME HALE, PHILLIP ☒ Delete
STREET ADDRESS 1001 N. US HWY 1
CITY-ST-ZIP JUPITER, FL 33477

TITLE VT
NAME WALZ, PETER ☐ Delete
STREET ADDRESS 1001 N. US HWY 1
CITY-ST-ZIP JUPITER, FL 33477

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE VT
NAME Carballo, Lawrence ☒ Change ☐ Addition
STREET ADDRESS 1001 N. US Hwy 1 Suite 800
CITY-ST-ZIP Jupiter, FL 33477

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

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: Lawrence Carballo Lawrence Carballo 1-9-06 561-207-2700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #