2006 FOR PROFIT CORPORATION ANNUAL REPORT. (AR)

ANNUAL REPORTAGE						Ion 10 2004 00.00 AM				
DOCUMENT # P99000042104 1. Entity Name					Ja	Jan 19, 2006 08:00 AM Secretary of State				
BILLY B. (GORDON, PA									
				No.	55.	-				
Principal Place		Mailing Addres								
5322 HILLCI CRESTVIEW			5322 HILLCREST ROAD CRESTVIEW FL 32539			iiinni iin suiin seiii seiii se	BISS SASSE SAIN AIRE	JIBBI HIBU SBIH BI	F1661 15 (23)	
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2. Principal P	lace of Business	3. Mailing Address				00 11100 11101 11100 1110 1111 111011.	ECCI CECCI SENIL RIGIO	(IBBL IIBLL BBIIL BI		
Suite, Apt. #, etc.		Suite, Apt. #, etc.								
Salte, Apr. #, etc.		Julie, Apt. #, etc.			15	t MOORE	CR2E034	(10/05)		
City & State		City & State			4. FE) Numb	59-357369	97	1 } .	oplied Fo	
Zip Country		Zip		untry	F Cort/Final	e of Status Desired		۱۱۳ \$8.75 Ad		
								Fee Require		
	6. Name and Address of Current	Registered Agent		Name	7. Name an	d Address of New	Registered A	agent		
GORDON, BILLY B					Street Address (P.O. Box Number is Not Acceptable)					
532: CRE	2 HILLCREST ROAD STVIEW FL 32539									
J.,_								··r·_ · =-		
				City			FL	Zip Cod		
	named entity submits this statement factors of registered agent.	or the purpose of ch	langing its regis	tered office or re	egistered agent, or b	oth, in the State of	Florida. I am	familiar with	, and acc	
SIGNATURE.	Signature, typed or printed name of registered agen	t and little if applicable	(NOTE Regis	lored Agent signaturo	required when reinstaling)		DATE			
	ILE NOW!!! FEE IS \$150.00	grand to distant				9. Election Can	npaign Financ	ng \$5 .	.00 May	
	May 1, 2006 Fee Will Be \$550.0 k Payable to Florida Department of					Trust Fund C	Contribution.		led to Fo	
10.	OFFICERS AND	(2018年1月1日 日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日	1	11.	ADDITIONS	L S/CHANGES TO O	FFICERS AND	DIRECTOR	RS IN 11	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 direct 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 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

DORAL BILL BILL B. Garder

1/18/06

FILED

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