

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000047818

FILED
Apr 11, 2006
Secretary of State

Entity Name: THE BEHR SNYDER GROUP, INC.

Current Principal Place of Business:

379 PINE RANCH TRAIL
OSPREY, FL 34229

New Principal Place of Business:

Current Mailing Address:

379 PINE RANCH TRAIL
OSPREY, FL 34229

New Mailing Address:

FEI Number: 65-0922530 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEHR, PAMELA
379 PINE RANCH TRAIL
OSPREY, FL 34229 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: BEHR, MICK
Address: 379 PINE RANCH TRAIL
City-St-Zip: OSPREY, FL 34229

Title: VP () Delete
Name: BEHR, PAMELA
Address: 379 PINE RANCH TRAIL
City-St-Zip: OSPREY, FL 34229

Title: VP () Delete
Name: SNYDER, KENDALL
Address: 379 PINE RANCH TRAIL
City-St-Zip: OSPREY, FL 34229

Title: ST () Delete
Name: SNYDER, CHRIS
Address: 379 PINE RANCH TRAIL
City-St-Zip: OSPREY, FL 34229

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PAMELA BEHR

VP

04/11/2006

Electronic Signature of Signing Officer or Director

_____ Date