

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P99000069500

1. Entity Name
DEBBIE/LYNN CORPORATION



**FILED
Feb 10, 2006 8:00 am
Secretary of State**

02-10-2006 90011 043 ***150.00

20006932



02022006 Chg-P CR2E034 (11/05)

Principal Place of Business
1002 CORAL COURT
BOYNTON BEACH, FL 33426

Mailing Address

2. Principal Place of Business
111 SW 10 COURT

3. Mailing Address
111 SW 10 COURT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
BOYNTON BCH FL

City & State
BOYNTON BCH FL

Zip 33426-4759 Country USA

Zip 33426-4759 Country USA

4. FEI Number
65-0939816

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MOSHIER, ROBERT R JR
1002 CORAL COURT
BOYNTON BEACH, FL 33426

Name LARNEY MOSHIER

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

111 SW 10 COURT

City BOYNTON BCH FL Zip Code 33426-4759

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 *Larney Moshier*

LARNEY MOSHIER

2/8/06

DATE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when remitting)

**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 Delete
NAME MOSHIER, ROBERT R JR
STREET ADDRESS 1002 CORAL COURT
CITY-ST-ZIP BOYNTON BEACH, FL 33426

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

Change Addition

7451 169 TH DRIVE
LIVE OAK FL 32060

TITLE D Delete
NAME MOSHIER, LARNEY
STREET ADDRESS 111 SW 10TH COURT
CITY-ST-ZIP BOYNTON BEACH, FL 33426

Change Addition

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

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 *Larney Moshier*, LARNEY MOSHIER - PRESIDENT - 2/8/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(561) 737-6778
Daytime Phone #