

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2006 8:00 am
Secretary of State

04-19-2006 90111 034 ***150.00

DOCUMENT # P99000090195

1. Entity Name
PANSCOPE, INC.



Principal Place of Business
**13011 SUGARBLUFF ROAD
CLERMONT, FL 34711**

Mailing Address
**13011 SUGARBLUFF ROAD
CLERMONT, FL 34711**

50013915



04122006 Chg-P CR2E034 (11/05)

4. FEI Number
59-3600843

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**DUNBAR, DAVID
13011 SUGAR BLUFF ROAD
CLERMONT, FL 34711**

7. Name and Address of New Registered Agent

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 | D | <input checked="" type="checkbox"/> Delete |
| NAME | ALATRISTE, ANTHONY MD | |
| STREET ADDRESS | 1803 PARK CENTER DR #120 | |
| CITY-ST-ZIP | ORLANDO, FL 32811 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | DUNBAR, DAVID | |
| STREET ADDRESS | 13011 SUGARBLUFF RD. | |
| CITY-ST-ZIP | CLERMONT, FL 34711 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | PLACE, DANIEL M | |
| STREET ADDRESS | 1803 PARK CENTER DRIVE | |
| CITY-ST-ZIP | ORLANDO, FL 32811 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|---------------------------|--|
| TITLE | D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | Mildred Alatrisme | |
| STREET ADDRESS | 1601 Park Center Dr Ste 5 | |
| CITY-ST-ZIP | Orlando FL 32835 | |
| TITLE | PVP SealTree D | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | David Dunbar | |
| STREET ADDRESS | 13011 Sugarbluff Rd | |
| CITY-ST-ZIP | CLERMONT, FL 34715 | |
| TITLE | D | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | Daniel m. Place | |
| STREET ADDRESS | 4315 Expo Dr. | |
| CITY-ST-ZIP | Manitowoc, WI 54220-7305 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David Dunbar 4/12/06 407-340-7872

Date

Daytime Phone #