## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000091970

Entity Name: DRIVERS' SCHOOL, INC.

TAVERNIER, FL 33070

City-St-Zip:

**FILED** Mar 26, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 88765 OVERSEAS HIGHWAY TAVERNIER, FL 33070 **Current Mailing Address: New Mailing Address:** P O BOX 1304 TAVERNIER, FL 33070 FEI Number: 65-0958154 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JOE MIKLAS, ATTORNEY, PA 88765 OVERSEAS HWY TAVERNIER, FL 33070 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition MIKLAS, SHELLEY Name: Name: PO BOX 1304 Address: Address: City-St-Zip: TAVERNIER, FL 33070 City-St-Zip: Title: VΡ Title: (X) Change ( ) Addition () Delete SISKO, MICHAEL J Name: SISKO, MICHEAL J Name: Address: P.O. BOX 1211 P.O. BOX 1211 Address:

TAVERNIER, FL 33070

Citv-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 Statutés. 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.

Ρ SIGNATURE: SHELLEY MIKLAS 03/26/2006