2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000096726

1. Entity Name
ROY BINGO SUPPLIES, INC.

Principal Place of Business	Mailing Address
128 INDUSTRIAL BLVD PENSACOLA, FL 32505	128 INDUSTRIAL BLVD PENSACOLA, FL 32505

01032006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3606545
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

JESMONTH, RICHARD E
200 S TARRAGONA STREET
PENSACOLA, FL 32502

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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 _____ DATE
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent's signature required when reinstating)

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	V
NAME	MYERS, VAN
STREET ADDRESS	1201 DOUGLAS CIRCLE
CITY-ST-ZIP	MOODY, AL 35004
TITLE	P
NAME	FERGUSON, BARBARA
STREET ADDRESS	608 IRONWOOD
CITY-ST-ZIP	SLIDELL, LA 70458
TITLE	ST
NAME	ROY, FLORENCE
STREET ADDRESS	305 MARGON CT
CITY-ST-ZIP	SLIDELL, LA 70458
TITLE	D
NAME	ROY, DONALD
STREET ADDRESS	305 MARGON CT
CITY-ST-ZIP	SLIDELL, LA 70458
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/06/06-80025-019 150.00

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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: VM Van Myers 1/3/06 850-477-1300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #