## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 20, 2006 08:00 AM Secretary of State

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1. Entity Name	MENT # P990000979 TE AND MAGRUDER, P.A.	936		-	Secret	ary of S	tate
Principal Place 121 W UNDER ORLANDO, FL		Mailing Address 121 W UNDERWOOD ST ORLANDO, FL 32806-7777	± .				 8 8 10 18 18 18 18 18 18 18 18 18 18 18 18 18
D	O NOT WRITE	IN THIS SPA	CE	01122006 4. FEI Number 59-3607		CR2E034 (11/0	Applied For Not Applicable Additional
6. Name and Address of Current Registered Agent  DEN BESTE, BRIAN P  121 W UNDERWOOD ST  ORLANDO, FL 32806-1111			DO NOT WRITE IN THIS SPACE				
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  PILE NOWILL FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  Proof the purpose of changing its registered agent and office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  INOTE Registered Agent signature required when refrastring)  OATE  9. Election Campaign Financing  Added to Fees							
10.  TITLE  MAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  MAME  STREET ADDRESS  CITY-ST-ZIP	OFFICERS AND I D DEN BESTE, BRIAN P 121 W UNDERWOOD ST ORLANDO, FL 328061111 D MAGRUDER, G B JR 121 W UNDERWOOD STREET ORLANDO, FL 32803	DIRECTORS		·	U080 <b>0</b> 0 01/24/06-	392299 30077-002	150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS GITY-ST-ZIP					NOT W		
TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS GITY-ST-ZIP					·	/ V .	

12. I hereby certify that the information supplied with this filling 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

1/16/05

Daytime Phone #