## 2006 FOR PROFIT CORPORATION

## **FILED** 006 00.00

| ANNUAL REPORT  |  |   |                            |                           | Apr 25, 2006 08:00 A    |                           |                            |  |
|--|--|---|----------------------------|---------------------------|-------------------------|---------------------------|----------------------------|--|
| J  | IENT # S03010  |   |                            |                           | Sec                     | retary o                  | of State                   |  |
| DEACON CIRCLE DESIGNS, INC.  |  |   |                            |                           |                         |                           |                            |  |
|  | ·  |   |                            | }<br>:                    |                         |                           |                            |  |
| Principal Place o  | of Business  | Mailing Address                               | ·                          | <b>1</b>                  |                         |                           |                            |  |
| 6131 PAYNE ST<br>WINDERMERE, F   |  | 6131 PAYNE STEWART DRIVE WINDERMERE, FL 34786 |                            |                           |                         |                           |                            |  |
|  | . 2 0 11 50  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,       |                            | <br>                      |                         | ANDY BIBLI BIBLI BIBLI BI |                            |  |
|  |  |   |                            |                           |                         |                           |                            |  |
|  |  | 01192006                                      | No Chg-P                   | CR2E034 (11/              | /05)                    |                           |                            |  |
| DO NOT WRITE IN THIS SPA   |  |   | CE                         | 4. FEI Numb               |                         |                           | Applied For                |  |
| <b>[</b><br>}  |  |   |                            | 59-302                    |                         | - \$8.75                  | Not Applicable  Additional |  |
|  |  |   |                            | 5. Certificate            | of Status Desired       | Fee Re                    |                            |  |
| <del></del>  | 6. Name and Address of Current Ro                                | egistered Agent                               | ==                         |                           |                         |                           |                            |  |
| BROWN, WANDA L. 6131 PAYNE STEWART DRIVE   |  |   |                            | DO                        | <b>NOT W</b>            | RITE                      |                            |  |
| WINDERMERE, FL 34786   |  |   |                            | IN T                      | THIS SF                 | ACE                       |                            |  |
|  |  |   |                            |                           |                         | <i>,</i> –                |                            |  |
| 8. The above na  | amed entity submits this statement for last of registered agent. | he purpose of changing its register           | ed office or register      | red agent, or bo          | th, in the State of Flo | orida. I am familiar      | with, and accept           |  |
|  | is of registered agents  |   |                            |                           |                         |                           |                            |  |
| SIGNATURE  | gnatura, typed or printed name of registered egent an            | 1 title if applicable. (NOTE: Registers       | eriuper erutsingle IneqA b | when reinstating?         |                         | DATE                      |                            |  |
| FILE NOW!!! FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  9. Election Campaign Fina Trust Fund Contribution |  |   |                            | .00 May Be<br>led to Fees | 00000<br>05/06/06       | 0532130<br>80072-017      | 150.00                     |  |
| 10.  | OFFICERS AND D   | RECTORS                                       |                            |                           |                         |                           |                            |  |
| TITLE E  | D<br>BROWN, WANDA L.   |   |                            |                           |                         |                           |                            |  |
| STREET ADDRESS 6   | 5131 PAYNE STEWART DRIVE   |   |                            |                           |                         |                           |                            |  |
| CITY-ST-ZIP V  | WINDERMERE, FL 34786   |   |                            |                           |                         |                           |                            |  |
| NAME   |  |   |                            |                           |                         |                           |                            |  |
| STREET ADDRESS CITY-ST-ZIP   |  |   |                            |                           |                         |                           |                            |  |
| TITLE  |  |   | 1                          |                           | -                       |                           |                            |  |
| NAME<br>STREET ADDRESS   |  |   |                            |                           |                         |                           |                            |  |
| CITY-ST-ZIP  |  |   |                            | DO                        | NOT W                   | RIIE                      |                            |  |
| TITLE<br>NAME  |  |   | 1                          | IN '                      | THIS SF                 | PACE                      |                            |  |
| STREET ADDRESS   |  |   | l                          |                           |                         |                           |                            |  |
| CITY-ST-ZIP  |  |   | 4                          |                           |                         |                           |                            |  |
| TITLE<br>NAME  |  |   |                            |                           |                         |                           |                            |  |
| STREET ADDRESS   |  |   |                            |                           |                         |                           |                            |  |
| CITY-ST-ZIP  |  |   |                            |                           |                         |                           | 15.211                     |  |

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.

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE: Wanda & Brown WANDA L. BROWN
SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

4/14/06 Date

(407)839-4261