

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 09, 2006 8:00 am
Secretary of State

08-09-2006 90014 002 ***150.00

DOCUMENT # S49097

1. Entity Name
O. & P. ASSOCIATES OF CHARLOTTE COUNTY, INC.



Principal Place of Business
**21216 OLEAN BLVD. UNIT 1
PORT CHARLOTTE, FL 33952**

Mailing Address
**21216 OLEAN BLVD. UNIT 1
PORT CHARLOTTE, FL 33952**

20052131



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

08012006 Chg-P CR2E034 (11/05)

4. FEI Number
65-0273260

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DROWNE, DANIEL K
21216 OLEAN BLVD., UNIT 1
PORT CHARLOTTE, FL 33952**

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
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **DROWNE, DANIEL K**
STREET ADDRESS **21216 OLEAN BLVD., UNIT 1**
CITY-ST-ZIP **PT. CHARLOTTE, FL 33952**

TITLE **VP** ☒ Delete
NAME **PALMER, EDWARD E**
STREET ADDRESS **21216 OLEAN BLVD., UNIT 1**
CITY-ST-ZIP **PT. CHARLOTTE, FL 33952**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ 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: **X**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/3/06

Daytime Phone #

ATTACHMENT 20052131

#549097

O&P ASSOCIATED OF CHARLOTTE CO., INC.
21216 OLEAN BLVD., UNIT 1
PORT CHARLOTTE, FL 33952

FLORIDA DEPT. OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 1500
TALLAHASSEE, FL 32302-1500

Aug 3, 2006

Dear Sir or Madam,

Please abate the penalty for not filing our Annual Report on time. We never received the first notice. We suspect that it was forwarded with the mail of a former principal (Edward E. Palmer) who has left the company.

We have indicated on the form to delete his name from officers and directors.

We are enclosing the usual fee for renewal of the Annual Report.

Thank you for your kindness in this matter.

Sincerely,


Daniel K Drowne