

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # S56052 1. Entity Name ZEPHYR ENTERPRISES, INC.			
Principal Place of Business 74 LA COSTA NOKOMIS, FL 34275 US		Mailing Address 74 LA COSTA NOKOMIS, FL 34275 US	
DO NOT WRITE IN THIS SPACE			
6. Name and Address of Current Registered Agent SELL, DUANE 74 LA COSTA NAKOMOS, FL 34275		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. (NOTE: Registered Agent signature required when recertifying) DATE _____			
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	P	DO NOT WRITE IN THIS SPACE	
NAME	SELL, DUANE		
STREET ADDRESS	74 LA COSTA		
CITY-ST-ZIP	NAKOMIS, FL 34275		
TITLE			
NAME			
STREET ADDRESS		DO NOT WRITE IN THIS SPACE	
CITY-ST-ZIP			
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TITLE			
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: _____ <i>Duane Sell</i> 4-25-06 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			



04252006 No Chg-P CR2ED34 (11/05)

 4. FEI Number
31-1326261
Applied For
Not Applicable
 5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

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 05/10/06-80076-010 156.00