## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## May 04, 2006 8:00 am Secretary of State DOCUMENT # S66992 05-04-2006 90514 001 \*2,100.00 SAVANNAH BELLE, INCORPORATED Principal Place of Business Mailing Address 66014716 4600 124TH STREET WEST PO BOX 249 CORTEZ, FL 34215 CORTEZ, FL 34215 US 04282006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0278728 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent BELL, DOUGLAS DO NOT WRITE 8708 50TH AVE.W. BRADENTON, FL 34210 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 reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME BELL, WALTER T 12115 45TH AVE W STREET ADDRESS CITY-ST-ZIP CORTEZ, FL TITLE BELL, CALVIN E NAME STREET ADDRESS 12115 45TH AVE W CITY-ST-ZIP CORTEZ, FL TITLE BELL, CARL DOUGLAS NAME STREET ADDRESS 8708 50TH AVE W DO NOT WRITE CITY-ST-ZIP BRADENTON, FL IN THIS SPACE TITLE NAME STREET ADDRESS CITY-\$T-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:

TITLE

STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP

941 794 1249

FILED