2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2006 08:00 AM
Secretary of State

EPDVNFOU!$ S73962

2/ Entity Name
PIERCE GROUP, INC.

Principal Place of Business	Mailing Address
6236!TS!24!O TBOUBVH-VTUJOF-!GM431; 3!!!!!VT	QP!CPY!278 PSBOHF!QBSL-!GM!43178.1278!!VT

EP OPU X SJUF JO UI JT TQBDF

01242006 OpIDi h.Q DS3F14511)2206*

5/ FEI Number
59-3076810

Applied For
Not Applicable

6/ Certificate of Status Desired ☑ %9/86 Beejqpobm Gf!ISf!rvjsf e

7/ Obn f !boe!Beesftt !pg!Dvssfou!Sfhjtufsfe!Bhf ou

DOSS, CALVIN P.
5125 SR 13 N
SAINT AUGUSTINE, FL 32092

EP OPU X SJUF! JO UI JT TQBDF

9/ 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
After May 1, 2006 Fee will be $550.00

:/ Election Campaign Financing Trust Fund Contribution. ☐ %6/11 NbzIGf ! Beef eJpIGf f

21/ OFFICERS AND DIRECTORS

TITLE	P
NAME	DOSS, CALVIN P.
STREET ADDRESS	PO BOX 167 N/A
CITY-ST-ZIP	ORANGE PARK, FL 320670167
TITLE	VPST
NAME	DOSS, MARILYN B.
STREET ADDRESS	PO BOX 1399
CITY-ST-ZIP	ORANGE PARK, FL 320671399
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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TITLE	
NAME	
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CITY-ST-ZIP	

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02/27/06-80032-018 158.75

EP OPU X SJUF! JO UI JT TQBDF

23/ 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.

TJHOBUVSF; [signature] Pres 2/14/06 (904) 529-8258
TJHOBUVSF!BOE!UZQFE!PS!QSJOUFE!OBNF!PG!TJHOJOH!PGGJDFS!PS!EJSFDUPS Date Daytime Phone #
CALVIN P DOSS