2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # S84473

1. Entity Name
DEBARY BUSINESS GROUP, INC.

FILED
Jan 25, 2006 08:00 AM
Secretary of State

Principal Place of Business	Mailing Address
101 HIGHWAY 17-92 DEBARY, FL 32713	101 HIGHWAY 17-92 DEBARY, FL 32713

01042006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3089519
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

HOLLY, JOSHUA
303 RIVIERA DRIVE
DEBARY, FL 32713

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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)

000004004P8
02/02/06 80003-018 150.00

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	D
NAME	HOLLY, DOUGLAS
STREET ADDRESS	101 HIGHWAY 17-92
CITY-ST-ZIP	DEBARY, FL
TITLE	D
NAME	HOLLY, ROSE
STREET ADDRESS	101 HIGHWAY 17-92
CITY-ST-ZIP	DEBARY, FL
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Rose Marie Holly, Secretary - ROSE MARIE HOLLY Secretary 1-22-06 386-668-5230
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #