


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 17, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # S94172**  
 1. Entity Name  
**WEB-MAR MANAGEMENT, INC.**



Principal Place of Business  
 1619 MOYLAN ROAD  
 PANAMA CITY BEACH, FL 32407

Mailing Address  
 P.O. BOX 9350  
 PANAMA CITY, FL 32417 US



01132006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
 59-3091529

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

MELODEE WEBER  
 1619 MOYLAN RD.  
 PANAMA CITY BEACH, FL 32407

**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, of both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when renewing)  
 Signature, typed or printed name of registered agent and title if applicable. 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	WEBER, JAMES J. JR. 2863 TUPELO PANAMA CITY BCH., FL
TITLE VP	WEBER, MELODEE 2863 TUPELO PANAMA CITY BCH., FL
TITLE D	MCKENNA, CHRIS 9733 120TH ST NO. SEMINOLE, FL
TITLE D	DEKORTE, JANE 9611 118TH LANE SEMINOLE, FL 33772
TITLE NAME	
TITLE NAME	

100000389208  
 01/20/06-80035-025 150.00

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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:** Jim Weber, Jr. 1/13/06 850-234-8428  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #