


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 12, 2006 08:00 AM
Secretary of State

DOCUMENT # V24962 1. Entity Name GROUP 10, INC.	
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Principal Place of Business 116 WINDSOR ROAD WEST JUPITER, FL 33469	Mailing Address 116 WINDSOR ROAD WEST JUPITER, FL 33469
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DO NOT WRITE IN THIS SPACE



07012006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0830101	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent DREHMANN, ROBERT S. 116 WINDSOR ROAD WEST JUPITER, FL 33469
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**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 reinstating)

000000563631
07/12/06-80007-019 150.00
DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DREHMANN, ROBERT S. 116 WINDSOR ROAD W JUPITER, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DREHMANN, CATHY C. 116 WINDSOR ROAD W JUPITER, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT S. DREHMANN

Date

Daytime Phone #

7-9-06 561-746-0179