

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V25598

FILED  
Apr 18, 2006  
Secretary of State

Entity Name: PREMIERE MANAGEMENT SERVICES, INC.

## Current Principal Place of Business:

PEMIERE MGT SVC  
11922 TEE TIME CIRCLE  
NEW PORT RICHEY, FL 34654 US

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 143  
NEW PORT RICHEY, FL 34673 US

## New Mailing Address:

P O BOX 146  
PORT RICHEY, FL 34673 US

FEI Number: 59-3112313

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPROWLS, JOSEPH D  
11922 TEE TIME CIRCLE  
NEW PORT RICHEY, FL 34654 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SPROWLS, JOSEPH D  
Address: 9228 CALLE ALTA CT  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: VT ( ) Delete  
Name: SPROWLS, MARIE  
Address: 9228 CALLE ALTA CT  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: S ( ) Delete  
Name: SPROWLS, CHRISTOPHER  
Address: 9228 CALLE ALTA CT  
City-St-Zip: NEW PORT RICHEY, FL 34655

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SPROWLS, JOSEPH D  
Address: 11922 TEE TIME CIRCLE  
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: VT (X) Change ( ) Addition  
Name: SPROWLS, MARIE  
Address: 11922 TEE TIME CIRCLE  
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: S (X) Change ( ) Addition  
Name: SPROWLS, CHRISTOPHER  
Address: 11922 TEE TIME CIRCLE  
City-St-Zip: NEW PORT RICHEY, FL 34654

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH D. SPROWLS

P/D

04/18/2006

Electronic Signature of Signing Officer or Director

Date