

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # V54461

1. Entity Name

GENESIS RESEARCH & DEVELOPMENT, INC.



Principal Place of Business

PO BOX 621237
OVIEDO, FL 32762-1237 US

Mailing Address

PO BOX 621237
OVIEDO, FL 32762-1237 US



04032006

No Chg-P

CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FCI Number

59-3136281

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MORSCH, MARK V.
2425 LEE RD
WINTER PARK, FL 32789

**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)

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	PD
NAME	RICHE, SAMUEL M.
STREET ADDRESS	8616 PORT SAID ST.
CITY- ST- ZIP	ORLANDO, FL 32817
TITLE	D
NAME	CASE, DAWNA L.
STREET ADDRESS	P. O. BOX 621237
CITY- ST- ZIP	OVIEDO, FL 32762
TITLE	D
NAME	CASE, RUSSELL L.
STREET ADDRESS	P. O. BOX 621237
CITY- ST- ZIP	OVIEDO, FL 32762
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

000000501301
04/25/06-80056 019 150.00

**DO NOT WRITE
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 affidavit with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Russell L. Case Jr.

3 APR 2006

Date

(407) 365-9639

Daytime Phone #