


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 24, 2006 08:00 AM
Secretary of State**

DOCUMENT # V61402 1. Entity Name O'KEEFE & WAINWRIGHT, INC.	
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Principal Place of Business 421 W BEACH DR PANAMA CITY, FL 32401	Mailing Address 421 W BEACH DR PANAMA CITY, FL 32401
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03202006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3151239	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 O'KEEFE, KAREN S 421 W BEACH DR PANAMA CITY, FL 32401
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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: Karen S.O'Keefe, President 4-21-06
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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT O'KEEFE, KAREN S 421 W BEACH DR PANAMA CITY, FL 32401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS O'KEEFE, JAMES V 421 W BEACH DR PANAMA CITY, FL 32401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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05/04/06-80105-015 150.00

**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 address, with all other like empowered.

SIGNATURE: Karen S. O'Keefe Karen S. O'Keefe, President 4-21-06 850-785-8746
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #