2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 17, 2006 08:00 AM Secretary of State

ANNUAL REPORT			Secretary of State
DOCU 1. Entity Nat DARL, IN			
Principal Pla	ce of Business Malling Address	'	
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			01042006 No Chg-P CR2E034 (11/05)
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	The state of the s		4. FEI Number Applied For 59-1533007 Not Applicable
	The same of the sa	ii \ †.√	5. Certificate of Status Desired
	6. Name and Address of Current Registered Agent		res required
SMITH, JANE W 1816 3RD COURT S.E.			DO NOT WRITE
WINTER	HAVEN, FL 33880		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			
Stgreaure, typed or publied remie of registered agent and title if applicable (NOTE, Rogistered Agent signature required when reinstating) DATE			
FILE NOWILL FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees			
10.	OFFICERS AND DIRECTORS	1	
TITLE NAME	VP SMITH, WADE C.		The second secon
STREET ADDRESS	1816 3RD COURT S.E.	3	No. of the Control of
CITY-ST-ZIP	WINTER HAVEN, FL 338804416	-	600000218353
NAME	SMITH, JANE W.		05/02/06-80005-018 150.00
STREET ADDRESS CITY-ST-ZIP	1816 3RD COURT S.E. WINTER HAVEN, FL 338604416		The second secon
TITLE	ST ST	i	
NAME CIDERT ADDRESS	HOUSTON, JAMES E	ł	
STREET ADDRESS CITY-ST-ZIP	6201 BANYAN TERRACE PLANTATION, FL 33317	1	DO NOT WRITE
HATE		1	IN THIS SPACE
NAME STREET ADDRESS			A HOUSE OF A STANCE OF THE STANCE
CITY-ST-ZIP		<i>(1)</i>	
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STREET ADDRESS		;	
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STREET ADDRESS CXTY-ST-ZIP] .	
	ertify that the information supplied with this filling does not qualify for the exe	emptions contained in	Chapter 119. Florida Statutes, I further certify that the information
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental apport is true and socurate and that my signature shall have the same legal effect as it 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.			
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SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR COSTS. COSTS. DAYLING PROVE & DAYLING PROVE & DAYLING PROVE &			
	STRUCTURE NAME A LITTLE OF LIGHT SEPTEMBER OF SIGNATURE OF CHECK ON DIRECT		eara Diniyume rπone #