

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

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Entity Name
2 PRODUCTIONS, INC.

Principal Place of Business
15430 CATALPA COVE LANE
FORT MYERS, FL 33908 US

Mailing Address
15430 CATALPA COVE LANE
FORT MYERS, FL 33908 US



01172006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0717224	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CORLEY, CHARLES R
15430 CATALPA COVE LANE
FORT MYERS, FL 33908

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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

000000397412
 01/30/06-80047-025 150.00

OFFICERS AND DIRECTORS

NAME	D
NAME	CORLEY, CHARLES R
STREET ADDRESS	15430 CATALPA COVE LANE
CITY - ST - ZIP	FORT MYERS, FL 33908
NAME	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
NAME	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
NAME	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHARLES R. CORLEY

Date

Daytime Phone #

1/17/06 (239) 437-4222