

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L97568

FILED
Jan 07, 2006
Secretary of State

Entity Name: CANAVERAL INDUSTRIES, INC.

Current Principal Place of Business:

166 CENTER ST
SUITE 210
CAPE CANAVERAL, FL 32920 US

New Principal Place of Business:

Current Mailing Address:

166 CENTER ST
SUITE 210
CAPE CANAVERAL, FL 32920 US

New Mailing Address:

124 ST CROIX AVE
COCOA BEACH, FL 32931 US

FEI Number: 59-3031904 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEALS, ROBERT E
730 E. STRAWBRIDGE AE., STE 101
MELBOURNE, FL 32901 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: DP () Delete
Name: HRADESKY, E. L.,
Address: 124 ST CROIX AVE.
City-St-Zip: COCOA BEACH, FL 32931 US

Title: D () Delete
Name: MORRIS, JOHN J
Address: 55 WESTVIEW LANE
City-St-Zip: COCOA BEACH, FL 32931

Title: DS () Delete
Name: EMORY, J. E.,
Address: 5120 PINTAIL LANE
City-St-Zip: MERRITT ISL., FL

Title: D () Delete
Name: MCARA, R. C.,
Address: 580 HIDDEN HOLLOW
City-St-Zip: MERRITT ISL., FL

Title: D () Delete
Name: ZACCARO, T. W.,
Address: 325 S. BANANA RIVER DR.
City-St-Zip: COCOA BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: EL HRADESKY

DP

01/07/2006

Electronic Signature of Signing Officer or Director

_____ Date