2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 13, 2006
Secretary of State

DOCUMENT# P04000079947

Entity Name: TRI-ROSE INVESTMENT GROUP, INC.

Current Principal Place of Business:

329 S. MILL VIEW WAY
PONTE VEDRA BEACH, FL 32084 US

New Principal Place of Business:

329 S. MILL VIEW WAY
PONTE VEDRA BEACH, FL 32082 US

Current Mailing Address:

1630 MEDICAL LANE
SUITE C
FT. MYERS, FL 33907 US

New Mailing Address:

329 S. MILLL VIEW WAY
PONTE VEDRA BEACH, FL 32082 US

FEI Number: 34-2002318 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JANKOWSKI, KELLIE
329 S. MILL VIEW WAY
PONTE VEDRA BEACH, FL 32084 US

Name and Address of New Registered Agent:

JANKOWSKI, KELLIE
329 S. MILL VIEW WAY
PONTE VEDRA BEACH, FL 32082 US

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: 07/13/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: JANKOWSKI, KELLIE
Address: 329 S. MILL VIEW WAY
City-St-Zip: PONTE VEDRA BEACH, FL 32084 US

Title: D ( ) Delete
Name: MONAGAS, COLLEEN
Address: 5166 KEANWOOD COURT
City-St-Zip: PALM HARBOR, FL 34685

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: JANKOWSKI, KELLIE
Address: 329 S. MILL VIEW WAY
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

Title: VP (X) Change ( ) Addition
Name: MONAGAS, COLLEEN
Address: 5166 KEANWOOD COURT
City-St-Zip: PALM HARBOR, FL 34685

Title: S ( ) Change (X) Addition
Name: JOSEPH, MARC
Address: 1630 MEDICAL LANE, SUITE C
City-St-Zip: FT. MYERS, FL 33907 US

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: KELLIE JANKOWSKI P 07/13/2006
Electronic Signature of Signing Officer or Director — Date