

**FILED**  
**May 04, 2006 8:00 am**  
**Secretary of State**

04-18-2006 90091 025 \*\*\*150.00

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**DOCUMENT # P98000065818**

1. Entity Name  
**GREAT AMERICAN FLYING CIRCUS, INC.**



Principal Place of Business  
**608 MARINER WAY  
ALTAMONTE SPRINGS, FL 32701**

Mailing Address  
**608 MARINER WAY  
ALTAMONTE SPRINGS, FL 32701**



04102008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FBI Number <b>69-3625157</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

8. Name and Address of Current Registered Agent

**KITTINGER, JOSEPH W  
608 MARINER WAY  
ALTAMONTE SPRINGS, FL 32701**

**DO NOT WRITE  
IN THIS SPACE**

9. 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 reappointing)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

10. Election Campaign Financing  
Trust Fund Contribution.  **\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SNOW, ROBERT R. 239 EAST COPELAND ORLANDO, FL 32808
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KITTINGER, JOSEPH W 608 MARINER WAY ALTAMONTE SPRINGS, FL 32701
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SNOW, LINDA 239 EAST COPELAND ORLANDO, FL 32808
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KITTINGER, SHERRY K 608 MARINER WAY ALTAMONTE SPRINGS, FL 32701
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**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 110, 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 change.

SIGNATURE:

*Joseph W. Kittinger*  
JOSEPH W. KITTINGER, REGISTERED AGENT OF GREAT AMERICAN FLYING CIRCUS, INC.

4-29-06  
Date

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407-331-5635