

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000107762

FILED
Mar 02, 2006
Secretary of State

Entity Name: SENSATIONAL SENIOR SOCIALS INC.

Current Principal Place of Business:

PO BOX 238581
PORT ORANGE, FL 32123

New Principal Place of Business:

Current Mailing Address:

PO BOX 238581
PORT ORANGE, FL 32123

New Mailing Address:

FEI Number: 59-3628643

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RHOADS, LORI A
812 BANBURY DR
PORT ORANGE, FL 32129 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: D () Delete
Name: RHOADS, LORI
Address: 812 BANBURY DR
City-St-Zip: PORT ORANGE, FL 32129

Title: D () Delete
Name: RHOADS, JESSICA M
Address: 812 BANBURY DR
City-St-Zip: PORT ORANGE, FL 32129

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: RHOADS, LORI
Address: 812 BANBURY DR
City-St-Zip: PORT ORANGE, FL 32129

Title: V.P. (X) Change () Addition
Name: RHOADS, JESSICA M
Address: 812 BANBURY DR
City-St-Zip: PORT ORANGE, FL 32129

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: LORI RHOADS

PRES

03/02/2006

Electronic Signature of Signing Officer or Director

Date