2006 FOR PROFIT CORPORATION

STREET ADDRESS

SIGNATURE

Apr 05, 2006 08:00 AM Secretary of State **ANNUAL REPORT DOCUMENT # 255417** F. N. DEHUY AND SON JEWELRY STORE, INC. Mailing Address Principal Place of Business PO BOX 563 139 1/2 N. WOODLAND BLVD. DELAND, FL 32720 US DELAND, FL 32721 No Cha-P CR2E034 (11/05) 01182006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-0947460 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE MACON, SUSAN 139 1/2 N. WOODLAND BLVD. DELAND, FL 32720 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent argument required when resisting) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE MACON, SUSAN NAME PO BOX 563 STREET ADDRESS CHY-SY-ZIP **DELAND, FL 32721** TITLE MAME STREET ADDRESS CITY-ST-ZIP HILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP DILE NAME STREET ADDRESS City-ST-ZP 333LE NAME

12. 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 it 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

M MACON 4/3/06 386-13

FILED