2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006
Secretary of State

DOCUMENT# 398979

Entity Name: ST. AUGUSTINE ALLIGATOR FARM, INC

Current Principal Place of Business:

999 ANASTASIA BLVD
ST AUGUSTINE, FL 32080

New Principal Place of Business:

Current Mailing Address:

999 ANASTASIA BLVD
ST AUGUSTINE, FL 32080

New Mailing Address:

FEI Number: 59-1395914 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DRYSDALE, DAVID C.
140 PELICAN REEF DR
ST AUGUSTINE, FL 32080 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:	CPD	( ) Delete
Name:	DRYSDALE, DAVID C,	
Address:	140 PELICAN REEF DR	
City-St-Zip:	ST AUGUSTINE, FL 32080	
Title:	TD	( ) Delete
Name:	BRUNSON, JENNIFER S	
Address:	171 POMPANO RD	
City-St-Zip:	ST. AUGUSTINE, FL 32086	
Title:	VD	( ) Delete
Name:	UPCHURCH, FRANK D.,, III	
Address:	4148 CREEKBLUFF	
City-St-Zip:	ST AUGUSTINE, FL 32086	
Title:	SD	( ) Delete
Name:	THAXTON, DAVID,	
Address:	371298 KINGS FERRY RD	
City-St-Zip:	HILLIARD, FL 32046	
Title:	VD	(X) Delete
Name:	PUCKETT, WILLIAM E	
Address:	108 OGLETHORPE BLVD	
City-St-Zip:	ST AUGUSTINE, FL 32080	
Title:	D	( ) Delete
Name:	USINA, GARY C	
Address:	1456 PACOS DR	
City-St-Zip:	ORMOND BCH, FL 32174	

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:	
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: JENNIFER S. BRUNSON TREA 04/26/2006

Electronic Signature of Signing Officer or Director — Date