2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 517122

Entity Name: SEMINOLE COMPLEX, INC.

FILED Jul 04, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

 10940 70TH AVENUE, NORTH
 10940 70TH AVENUE NORTH

 SEMINOLE, FL 33772
 US

 SEMINOLE, FL 33772
 US

Current Mailing Address: New Mailing Address:

 10940 70TH AVENUE, NORTH
 10940 70TH AVENUE NORTH

 SEMINOLE, FL 34642
 SEMINOLE, FL 33772
 US

FEI Number: 59-1804146 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ARBOGAST, MARYLU

11686 IRVINE AVE

SEMINOLE, FL 33772 US

ARBOGAST, MARYLU

11686 IRVING AVE

SEMINOLE, FL 33772 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: 07/04/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 ARBOGAST, RALPH M.,
 Name:
 ARBOGAST, RALPH M.,

 Address:
 7380 111TH ST N.
 Address:
 7380 111TH ST N.

 City-St-Zip:
 SEMINOLE, FL
 33772 US

Title: S () Delete Title: S (X) Change () Addition

 Name:
 ARBOGAST, MARYLU
 Name:
 ARBOGAST, MARYLU

 Address:
 11686 IRVINE AVE
 Address:
 11686 IRVING AVE

 City-St-Zip:
 SEMINOLE, FL 33772
 City-St-Zip:
 SEMINOLE, FL 33772 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: MARYLU ARBOGAST SEC 07/04/2006