

**2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
May 16, 2006  
Secretary of State**

DOCUMENT# 681689

Entity Name: NANNIE LEE'S STRAWBERRY MANSION, INC.

**Current Principal Place of Business:**

1218 E. NEW HAVEN AVENUE  
MELBOURNE, FL 32901

**New Principal Place of Business:**

**Current Mailing Address:**

1218 E. NEW HAVEN AVENUE  
MELBOURNE, FL 32901

**New Mailing Address:**

FEI Number: 59-2107107      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BROWN, ROBERT J  
1218 E. NEW HAVEN AVENUE  
MELBOURNE, FL 32901 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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BROWN, ROBERT  
Address: 1218 EAST NEW HAVEN AV  
City-St-Zip: MELBOURNE, FL 32901 US

Title: V ( ) Delete  
Name: BROWN, ROBERT J  
Address: 1218 E. NEW HAVEN AVE.  
City-St-Zip: MELBOURNE, FL 32901 US

Title: STD ( ) Delete  
Name: BROWN, SUSAN L  
Address: 405 2ND AVE.  
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: V ( ) Delete  
Name: JAQUAYS, LESLIE  
Address: 3086 GRACE ST  
City-St-Zip: WEST MELBOURNE, FL 32904 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: STD (X) Change ( ) Addition  
Name: BROWN, ROBERT J  
Address: 1218 E. NEW HAVEN AVE.  
City-St-Zip: MELBOURNE, FL 32901 US

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: ROBERT J. BROWN

P

05/16/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date