2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700318

FILED Apr 28, 2006 Secretary of State

Entity Name: FLORIDA UNITED NUMISMATISTS, INC.

Current Principal Place of Business:				New Principal Place of Business:		
270 HUMPHREY RD LAKE MARY, FL 32746 US				774 SILVER CLOUD CIR. 106 LAKE MARY, FL 32746 US		
Current Mailing Address:				New Mailing Address:		
P.O. BOX 951988 LAKE MARY, FL 32795				4185 W. LAKE MARY BLVD. 232 LAKE MARY, FL 32746		
FEI Number:	23-7421541	FEI Number Applied For()	FEI Nun	nber Not App		Certificate of Status Desired ()
Name and	Address of C	urrent Registered Agent:		Name and	Address of N	lew Registered Agent:
GRELLMAN, CYNTHIA W. 270 HUMPHREY ROAD LAKE MARY, FL 32746 US				WIBKER, CYNTHIA L. 4185 W. LAKE MARY BLVD. 232 LAKE MARY, FL 32746 US		
	named entity s of Florida.	ubmits this statement for the pu	rpose o	f changing i	ts registered o	ffice or registered agent, or both,
SIGNATURE: CYNTHIA L. WIBKER						04/28/2006
	Electroni	c Signature of Registered Agen	nt			Date
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	P () BEST, CARRIE I 1610 BIRCHWO LAKELAND, FL	OD LOOP		Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	D () ABBOTT, ED, 1549 WEXFORI PALM HARBOR,			Title: Name: Address: City-St-Zip:	VP (X) HURST, BOBB 7739 WINDOVE TITUSVILLE, FI	ER WAY
Title: Name: Address: City-St-Zip:	S () GRELLMAN, CIN 270 HUMPHREY LAKE MARY, FL	′RD		Title: Name: Address: City-St-Zip:	S (X) WIBKER, CIND 774 SILVER CL LAKE MARY, F	OUD CIR #106
Title: Name: Address: City-St-Zip:	D () HYNDS, GENE, 4746 S ATLANTI PONCE INLET, I			Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	TR () FRENCH, BOB 14001 MIDDLE TAMPA, FL 336			Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	D () WELLS, RICHAI 2520 BIG BEND MAITLAND, FL	TR		Title: Name: Address: City-St-Zip:	()	Change () Addition

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CYNTHIA L. WIBKER S 04/28/2006