2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2006
Secretary of State

DOCUMENT# 715901

Entity Name: SHOW FOLKS RETIREMENT VILLAGE, INC.

Current Principal Place of Business:

6915 RIVERVIEW DR.
GIBSONTON, FL 33534

New Principal Place of Business:

6915 RIVERVIEW DR.
RIVERVIEW, FL 33569

Current Mailing Address:

PO BOX 188
GIBSONTON, FL 33534 US

New Mailing Address:

FEI Number: 23-7258087 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MCEWEN, DAVID B
100 FIRST AVE. SOUTH, STE 340
ST. PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

MCEWEN, DAVID B
560 FIRST AVENUE NORTH
ST. PETERSBURG, FL 33701 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: _____ 04/19/2006
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: RIMES, TERESA
Address: 6915 RIVERVIEW DR
City-St-Zip: GIBSONTON, FL 33534

Title: SD ( ) Delete
Name: GAGNE, ROLAND
Address: 6915 RIVERVIEW DR
City-St-Zip: GIBSONTON, FL 33534

Title: TD ( ) Delete
Name: DUVALL, PHYLLIS
Address: 6915 RIVERVIEW DR
City-St-Zip: GIBSONTON, FL 33534

Title: VD ( ) Delete
Name: SKRIVANIE, HELEN
Address: 1511 RIVER DRIVE
City-St-Zip: RUSKIN, FL 33570

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: RIMES, TERESA
Address: 6915 RIVERVIEW DR
City-St-Zip: RIVERVIEW, FL 33569

Title: SD (X) Change ( ) Addition
Name: GAGNE, ROLAND
Address: 6915 RIVERVIEW DR
City-St-Zip: RIVERVIEW, FL 33569

Title: TD (X) Change ( ) Addition
Name: DUVALL, PHYLLIS
Address: 6915 RIVERVIEW DR
City-St-Zip: RIVERVIEW, FL 33569

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

Title: D ( ) Change (X) Addition
Name: SIKES, CAROL J
Address: 6111 PALM AVE.
City-St-Zip: GIBSONTON, FL 33534

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: CAROL J. SIKES D 04/19/2006
Electronic Signature of Signing Officer or Director — Date