2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 24, 2006 8:00 am Secretary of State

DOCUMENT # 739005 1. Entity Name FLORIDA FRONTIERSMEN, INC.							01-24-2006 90015 048 ****70.00					
Principal Place of Business 2106 BETTY ANN DRIVE AUBURNDALE, FL 33823 US Mailing Address 2106 BETTY ANN DRIVE AUBURNDALE, FL 33823						ıs						
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Suite, Apt. #, etc.			Suit	Suite, Apt. #, etc.				01062006	Chg-NP	CR2E	037 (11/05)	
City & State			City	City & State				4. FEI Number 59-2849			<u> </u>	oplied For ot Applicable
Zip	Zip Country		Zip	Zip		Country		5. Certificate	of Status Desir	ed 📈	\$8.75 Add	ditional
	6. Name	and Address of Current	Registered	I Agent	J		-	7. Name and	Address of No	ew Registere		
FULBRIGH	HT CREC					Name	GIV.	ada Es	ılbe:	0 h +	·	
2106 BET	-					Street Address (P.O. Box Number is Not Acceptable)						
AUBURNE	DALE, FL	33823					CLOLA	Detty	Ann	DC .		
						City A		1 1		F	Zip Cod	e
8. The above named entity submits this statement for the purpose of changing its registered office or regis							red agent or bot	e h in the State		<u> - 579</u>	23	
the obligat	Glynd	ered agent. a Fulbright or printed name of registered agent	Tre	asurer		Y n	eda	Zulle	3/ <i>t</i>		11-06	
	Signature, typed	or printed name of registered agent	and title if appli	cable (NOT	E: Registere	d Ageol signa	ture required	when reinstating)	<i>)</i>	DAπ	.	
	Filing Fe	or printed name of registered agent e is \$61.25 lay 1, 2006	and title if appli	9. Election Car Trust Fund (npaign F	inancing	ture required	\$5.00 May B Added to Fees	<i>)</i>	Make che	eck payable to	
10.	Filing Fe Due by N	e is \$61.25		9. Election Car Trust Fund (npaign F	inancing		\$5.00 May B		Make che Florida Dep	eck payable to partment of S	tate
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Signature and typed or propried by Signa