2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #740760

1. Entity Name



Feb 27, 2006 8:00 am Secretary of State

02-27-2006 90090 032 ****61.25

FILED

	ATION,INC.	NEKS						
Principal Plac 3411 RIVIER SARSOTA, FL		Mailing Address 3524 RIVIERA DR: SARASOTA, FL 34232	US				DINI NUN BINI AIN AIN AIN	Hrei ei ieri
2. Principal P	Place of Business	3. Mailing Address						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		02	082006 Chg-NP	CF	82E037 (11/05)	
City & Stat	e e	City & State		4.	FEI Number 59-2268846		 `	oplied For ot Applicable
Zip	Country	Zip	Country	5.	Certificate of Status D	esired [\$8.75 Add Fee Require	
	6. Name and Address of Current	Registered Agent		7.	Name and Address o	f New Regist	ered Agent	
DAHNE, S	USAN W		Name					
-3524 RIVI	ERA DR.		Street A	ddress (P.O.:	Box Number is Not Ac	ceptable)		
SAROSOT	ΓA, FL 34232							
			City				FL Zip Cod	le
	named entity submits this statement for	r the purpose of changing its re	gistered office or	r registered aç	gent, or both, in the St	ate of Florida.	i am familiar with,	and accept
the obligat	tions of registered agent.							
SIGNATURE.	, <u>, </u>							
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: R	legistered Agent stones	ture required when r	einstation)		DATE	
462 (4.49)	Signature, typed or printed name pt registered agent	2 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	legistered Agent signat	147.4	1.17	22.66	DATE	- <u> </u>
4 15 X 20	Filing Fee is \$61.25 Due by May 1, 2006	and title if applicable. (NOTE: R	aign Financing	\$5.	1.17	Make	check payable to	
10.00 NO 12.15	Filling Fee Is \$61.25 Due by May 1, 2006 OFFICERS AND DIE	9. Election Camp Trust Fund Cor	aign Financing tribution.	\$5. ADDIT	00 May Be	Make (check payable to Department 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 propowered.

SIGNATURE:

MATURE AND TYPED OR PROVIDED NAME OF SIGNING OFFICER OR DIRECTOR