



2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 21, 2006 8:00 am
Secretary of State

07-21-2006 90025 013 ****61.25

DOCUMENT # 762439 1. Entity Name THE ROMPUS, INC.					
Principal Place of Business 4766 LONGBOW DR TITUSVILLE, FL 32796				Mailing Address 4766 LONGBOW DR TITUSVILLE, FL 32796	
2. Principal Place of Business 609 MADRID AVE Suite, Apt. #, etc.		3. Mailing Address 609 MADRID AVE Suite, Apt. #, etc.			
City & State VENICE, FL		City & State VENICE, FL		4. FEI Number 59-2470612	
Zip 34285		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ROSS, ROBERT K 4766 LONGBOW DR TITUSVILLE, FL 32796				7. Name and Address of New Registered Agent Name JIM WOODS Street Address (P.O. Box Number is Not Acceptable) 609 MADRID AVE City VENICE FL Zip Code 34285	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u><i>Jim Woods</i></u> <u>Jim Woods</u> <u>7/18/06</u> <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P NANTZ, HAROLD 1421 HENDREN DR MELBOURNE, FL 32935 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT TIM BROZOVICH 1513 FORDE AVE TARPON SPRINGS, FL 34689 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V FOGLER, NED 14928 FEATHER COVE ROAD CLEARWATER, FL 33762 SAME <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	TREASURER JIM WOODS 609 MADRID AVE VENICE, FL 34285 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T ROSS, ROBERT K 4766 LONGBOW DR TITUSVILLE, FL 32796 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	BOARD DIRECTOR BRETT CLEVELAND 5126 NW 2601 PL CHANDLERVILLE, FL 32606 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FARRELL, FRED 8425 BUENA VISTA ROAD FORT MYERS, FL 33912 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	BOARD DIRECTOR BRETT CLEVELAND 5126 NW 2601 PL CHANDLERVILLE, FL 32606 <input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HEVEL, BRYAN 6347 57TH AVE N SAINT PETERSBURG, FL 33709 SAME <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	BOARD DIRECTOR BRETT CLEVELAND 5126 NW 2601 PL CHANDLERVILLE, FL 32606 <input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WUNDERLIN, WILLIAM 2131 RIDGE RD. UNIT T-114 LARGO, FL 33778 NOW THE SECRETARY <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	BOARD DIRECTOR BRETT CLEVELAND 5126 NW 2601 PL CHANDLERVILLE, FL 32606 <input type="checkbox"/> Change <input type="checkbox"/> Addition		
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: <u><i>Jim Woods</i></u> <u>Jim Woods</u> <u>7/18/06</u> <u>(941) 480-1933</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

ATTACHMENT

40100288

#762439

Dears Sirs:

I Apologize for the tardiness
of this report & check. Our
previous treasurer thought this
had been taken care of in February.

Hopefully we are back on schedule
and in good graces!

Jim Woods