2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#765550

FILED Apr 10, 2007 Secretary of State

Entity Name: SCHUHPLATTLER GRUPPE ALPENROSE, INC. **Current Principal Place of Business: New Principal Place of Business:** % THE GERMAN-AMERICAN SOCIETY 381 ORANGE LANE CASSELBERRY, FL 32707 **New Mailing Address: Current Mailing Address:** % THE GERMAN-AMERICAN SOCIETY 381 ORANGE LANE CASSELBERRY, FL 32707 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SOMMER, GUENTER 6407 LYNN ROAD ORLANDO, FL 32810 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BRAUN, ANA Name: Name: 3032 LOS AMIGOS DR Address: Address: City-St-Zip: ORLANDO, FL City-St-Zip: Title: Title: () Delete () Change () Addition Name: WRIGHT, CHRISTA Name: Address: 607 ELOISE AVE Address: City-St-Zip: TITUSVILLE, FL City-St-Zip: Title: () Delete Title: SD (X) Change () Addition SPOTORNO, EVA, Name: SPROLE, RAE Name: 402 ABBEY RIDGE COURT Address: Address: 947 ORANGE AVE. City-St-Zip: OCOEE, FL City-St-Zip: OVIEDO, FL 32765 Title: PD () Delete Title: (X) Change () Addition Name: SOMMER, GUENTER Name: BERNSTEN, BEATE Address: 6407 LYNN ROAD Address: 723 BROOK FOREST CT. ORLANDO, FL City-St-Zip: City-St-Zip: APOPKA, FL 32712

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: ANA E. BRAUN SD 04/10/2007