2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2007
Secretary of State

DOCUMENT# 770621

Entity Name: SECOND FLORIDA CAVALRY, INC.

Current Principal Place of Business:

C/O THOMAS A. DENSMORE, SR.
8795 KIOWA TRAIL
KIOWA, FL 34747

New Principal Place of Business:

C/O THOMAS A. DENSMORE, SR.
8795 KIOWA TRAIL
KISSIMMEE, FL 347471524

Current Mailing Address:

C/O THOMAS A. DENSMORE, SR.
8795 KIOWA TRAIL
KISSIMMEE, FL 34747

New Mailing Address:

C/O THOMAS A. DENSMORE, SR.
8795 KIOWA TRAIL
KISSIMMEE, FL 347471524

FEI Number: 59-2915935 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DENSMORE, THOMAS A., SR.
8795 KIOWA TRAIL
KISSIMMEE, FL 34747 US

Name and Address of New Registered Agent:

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:

Title: VP ( ) Delete
Name: SERMAK, RICH
Address: 11122 HAMBLEY AVE.
City-St-Zip: ORLANDO, FL

Title: S/TD ( ) Delete
Name: DENSMORE, THOMAS A SR
Address: 8795 KIOWA TRAIL
City-St-Zip: KISSIMMEE, FL 34747

Title: D ( ) Delete
Name: HEINOLD, JOHN
Address: 10360 SW 27TH AVE
City-St-Zip: OCALA, FL 34479

Title: D ( ) Delete
Name: HAMMOND, SCOTT
Address: 8705 KIOWA TRAIL
City-St-Zip: KISSIMMEE, FL 34747

Title: PD ( ) Delete
Name: SCOTT, GEORGE V
Address: 4984 124TH ST.
City-St-Zip: WELLBORN, FL 32094

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: THOMAS A. DENSMORE, SR. S/TD 01/28/2007
Electronic Signature of Signing Officer or Director — Date