2006 FOR PROFIT CORPORATION

FILED Mar 20, 2006 08:00 AM ANNUAL REPORT **Secretary of State** DOCUMENT # F04000001746 1. Entity Name DICKINSON ENTERPRISES, INC. Mailing Address Principal Place of Business 2507 COLLEGE HILL DR. PO BOX 1193 VALRICO, FL 33594 BRANDON, FL 33511 03082006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 22-3850347 Not Applicable \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE DICKINSON, DOUG 2507 COLLEGE HILL DR. BRANDON, FL 33511 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) 9. Election Campaign Financing \$5.00 May 8e FILE NOW!!! FEE 18 \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PVST TITLE NAME DICKINSON, DOUG STREET ADDRESS 2507 COLLEGE HILL DR. BRANDON, FL 33511 CITY-ST-ZIP 000000474135 04/04/06-80010-825 150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 ceith; that I am an officer or director of the corporation or the receiver or trustee empowered to expoute this report as required by Chapter 607, 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.

Dayteria Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: