2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004144

Entity Name: THE DEXTRA GROUP, INC.

FILED Apr 08, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

650 SE PARADISE POINT ROAD, #6000 4548 S. SUNCOAST BLVD. CRYSTAL RIVER, FL 34429

#143

HOMOSASSA, FL 34446

Current Mailing Address: New Mailing Address:

650 SE PARADISE POINT ROAD, #6000 4548 S. SUNCOAST BLVD CRYSTAL RIVER, FL 34429

#143

HOMOSASSA, FL 34446

FEI Number: 20-1314570 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

GILL, KATHLEEN O GILL, KATHLEEN O 12029 W. DOLPHIN CT 2908 N. RIVERS EDGE BLVD.

CRYSTAL RIVER, FL 34429 US US HOMOSASSA, FL 34448

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: 04/08/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSC () Delete Title: (X) Change () Addition GILL, KATHLEEN O Name: Name: GILL, KATHLEEN O

650 SE PARADISE POINT ROAD, #6000 4548 S. SUNCOAST BLVD, #143 Address: Address:

City-St-Zip: CRYSTAL RIVER, FL 34429 City-St-Zip: HOMOSASSA, FL 34446

() Delete Title: VVCT Title: **VVCT** (X) Change () Addition

Name: BATSEL. KURT R Name: BATSEL, KURT R

4665 LOWER ROSWELL ROAD, #154 Address: 1205 JOHNSON FERRY RD STE 136-446 Address:

MARIETTA, GA 30068 MARIETTA, GA 30068 City-St-Zip: 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHLEEN O. GILL **PRES** 04/08/2006