

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F59468

FILED
Feb 20, 2006
Secretary of State

Entity Name: TARPON SPRINGS SPONGE EXCHANGE, INC.

Current Principal Place of Business:

C/O MICHAEL A. HOULLIS
10 DODECANESE BLVD
TARPON SPRINGS, FL 34689

New Principal Place of Business:

530 HILL STREET
TARPON SPRINGS, FL 34689

Current Mailing Address:

ALEXANDER J GOULD
3998 SILHOUETTE LANE
HOLIDAY, FL 34691

New Mailing Address:

ALEXANDRIA J GOULD
3998 SILHOUETTE LANE
HOLIDAY, FL 34691

FEI Number: 59-2916084

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOULD, ALEXANDRIA J.
3998 SILHOUETTE LANE
HOLIDAY, FL 34691 US

Name and Address of New Registered Agent:

GOULD, ALEXANDRIA J
3998 SILHOUETTE LANE
HOLIDAY, FL 34691 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: ALEXANDRIA J GOULD

02/20/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GOULD, ALEXANDRIA J.,
Address: 530 HILL STREET
City-St-Zip: TARPON SPRINGS, FL 34689

Title: ST () Delete
Name: GOULD, ALEXANDRIA J.,
Address: 530 HILL STREET
City-St-Zip: TARPON SPRINGS, FL 34689

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GOULD, ALEXANDRIA J
Address: 530 HILL STREET
City-St-Zip: TARPON SPRINGS, FL 34689

Title: ST (X) Change () Addition
Name: GOULD, ALEXANDRIA J
Address: 530 HILL STREET
City-St-Zip: TARPON SPRINGS, FL 34689

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: ALEXANDRIA J GOULD

PRES

02/20/2006

Electronic Signature of Signing Officer or Director

Date