## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# G04615

Entity Name: THE ICE CREAM CLUB, INC.

FILED Feb 28, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	e of Business:
	H RIDGE RD N BEACH, FL 33	426 US		
Current Mailing Address:			New Mailing Address:	
	H RIDGE RD N BEACH, FL 33	426 US		
FEI Number	: 59-2214847	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of Cu	rrent Registered Agent:	Name and Address	of New Registered Agent:
WARD, DA 4420 BEA	CONRAD, ESQU AMON, POSNER CON CR #100 LM BEACH, FL 3			
	e named entity sul e of Florida.	omits this statement for the	purpose of changing its register	ed office or registered agent, or both,
SIGNATUI	RE:			
	Electronic	Signature of Registered A	gent	Date
Election Ca	mpaign Financing T	rust Fund Contribution ( ).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	PD () DO DRAPER, RICHAR 1580 HIGH RIDGE BOYNTON BEACH	PD D., EROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	SVD () DO JACKSON, THOMA 1984 WHITE COR WELLINGTON, FL	AS D., AL WAY	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	D () Do HOECKER, JOHN 18969 S.E. WIND JUPITER, FL 334	J., WOOD ISLE LN	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	VPD () DO SCOTT, MIKE, 7170 MICHIGAN IS LAKE WORTH, FL	SLES RD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name	VPD ()DO		Title:	( ) Change ( ) Addition

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.

Address:

City-St-Zip:

SIGNATURE: RICHARD D. DRAPER P 02/28/2006

4160 CATALPHA AVE

City-St-Zip: PALM BEACH GARDENS, FL 33410

Address: