## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 02, 2006 8:00 am Secretary of State

Principal Place of Business 7801 PARK BLVD PINELLAS PARK, FL 34665 US  3. Mailing Address 7801 PARK BLVD PINELLAS PARK, FL 34665 US  3. Mailing Address  Suite, Apt. #, etc.  City & State  Country  3378  Country  5. Certificate of Status Desired  6. Name and Address of Current Registered Agent  HUNTLEY, HARDY 7801 PARK BLVD PINELLAS PARK, FL 34665  City  Ci	DOCUMENT # H12159  1. Entity Name WAGON WHEEL FLEA MARKET, INC.					05-02-2006 90419 030 ***150.00				
Suite, Apt. #, etc.  Suite, Apt. #, etc.  O4272006 Chg-P CR2E034 (11/05)  DETA 19773 Applied For Sp-2477436 Not Applied For No	7801 PARK BLVD 7801 PARK BLVD			4665	US			II BRAW GURU BURU ANGU BURU BURU	II T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
City & State  Country  Signature: Nood or privated name of registered agent and talle if applicable.  (NOTE: Registered Agent signature required when reinstating)  PILE NOWILI FEE IS \$150.00  Applied For SAZEUS4 (ITVO)  Not Applied For S9-2477436  Street Address of Status Desired Status Desired  Street Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code S  Zip Code S  Zip Code S  City  FL  Zip Code S  Signature: Nood or privated name of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  Signature: Nood or privated name of registered agent and talle if applicable.  (NOTE: Registered Agent signature required when reinstating)  DATE  FILE NOWILI FEE IS \$150.00	2. Principal Place of Business 3. Mailing Address									
City & State  City & State  City & State  Country  Street Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  City  FL  City  FL  City  City  FL  City  City  FL  City  City  City  City  FL  City  City  City  City  FL  City  City  City  City  City  FL  City  FL  City  City	Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		04272006				
5. Certificate of Status Desired Fee Required  6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  Name  HUNTLEY, HARDY 7801 PARK BLVD. PINELLAS PARK, FL 34665  City  FL Zip Code 33.78  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, hyped or printed name of registered agent and title if applicable.  (NOTE: Registered Agent signature required when reinstating)  DATE  FILE NOW!!! FEE IS \$150.00  9. Election Campaign Financing \$5.00 May Be	City & State		City & State					Ap	·	
Name  HUNTLEY, HARDY 7801 PARK BLVD. PINELLAS PARK, FL 34665  City  FL Zip Code 8  City  FL Zip Code 8  Street Address (P.O. Box Number is Not Acceptable)  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 reinstating)  DATE  FILE NOWILL FEE IS \$150.00  9. Election Campaign Financing \$5.00 May Be	3375		Zip 33781	781 Country		5. Certificate of	of Status Desired			
HUNTLEY, HARDY 7801 PARK BLVD. PINELLAS PARK, FL 34665  City  FL Zip Code 3 TS  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, hood or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  FILE NOWIII FEE IS \$150.00  9. Election Campaign Financing \$5.00 May Be		6. Name and Address of Currer	nt Registered Agent			7. Name and	Address of New F	Registered Agent		
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10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	10.	OFFICERS AN	D DIRECTORS	11.		ADDITIONS/C	CHANGES TO OFF	FICERS AND DIRECTORS	S IN 11	
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CITY-ST-ZIP  CITY-ST-ZIP  12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information		and the that the information constitution	ith this filipp deep not available	L		d in Chaptor 110	Florida Statutes	I further certify that the in	nformation	

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 catt; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

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