

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J19977

FILED
Aug 15, 2006
Secretary of State

Entity Name: NATURAL RESOURCES OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

LAUREL AVENUE
P. O. BOX 419
KINGSTON, NJ 08528

New Principal Place of Business:

Current Mailing Address:

LAUREL AVENUE
P. O. BOX 419
KINGSTON, NJ 08528

New Mailing Address:

FEI Number: 59-2728391

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOUGHTON, WILLIAM W
151 NE 95TH ST
ANTHONY, FL 32617 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STAVOLA, WILLIAM H.,
Address: 840 NAVESINK RIVER RD.
City-St-Zip: LOCUST, NJ

Title: V () Delete
Name: OSBORNE, STEPHEN
Address: P.O. BOX 419
City-St-Zip: KINGSTON, NJ 08528

Title: ST () Delete
Name: CONWAY, GEORGE
Address: P.O. BOX 419
City-St-Zip: KINGSTON, NJ 08528

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: CROWLEY, MICHAEL J
Address: P.O. BOX 419
City-St-Zip: KINGSTON, NJ 08528

Title: ST (X) Change () Addition
Name: CONWAY, GEORGE M JR.
Address: P.O. BOX 419
City-St-Zip: KINGSTON, NJ 08528

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: MICHAEL J. CROWLEY

V

08/15/2006

Electronic Signature of Signing Officer or Director

_____ Date