2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J41250

Entity Name: MIRACLE OF CENTRAL FLORIDA, INC.

FILED Feb 14, 2006 Secretary of State

Current Princip	al Place of Business:	New Princip	al Place of Business

P.O. BOX 9602 4099 LAKE ALFRED RD. WINTER HAVEN, FL 33883 4099 LAKE ALFRED RD. WINTER HAVEN, FL 33881

Current Mailing Address: New Mailing Address:

P.O. BOX 9602 4099 LAKE ALFRED RD. WINTER HAVEN, FL 33883 4099 LAKE ALFRED RD. WINTER HAVEN, FL 33881

FEI Number: 59-2735504 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MURPHY, DENNIS L 4727 US HWY 19 MURPHY, DENNIS L 4727 US HWY 19

WINTER HAVEN, FL 33881 US NEW PORT RICHEY, FL 34652 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: DENNIS L. MURPHY 02/14/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition

Title: PVST () Delete Title:

 Name:
 MURPHY, DENNIS L
 Name:

 Address:
 4727 US HWY 19
 Address:

 City-St-Zip:
 NEW PORT RICHEY, FL 34652
 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: DENNIS L MURPHY PRES 02/14/2006