
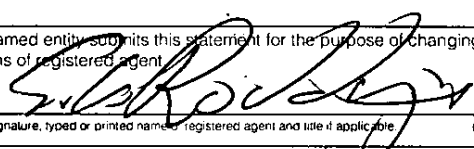
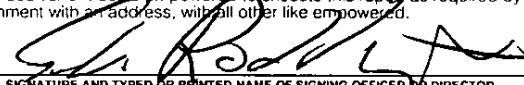


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 04, 2006 8:00 am**  
**Secretary of State**

05-04-2006 90247 020 \*\*\*150.00

<b>DOCUMENT # K29080</b> 1. Entity Name <b>THE RODDY CORPORATION</b>					
Principal Place of Business 180 ROYAL PALM WAY #201 PALM BEACH, FL 33480 US			Mailing Address 180 ROYAL PALM WAY SUITE 201 PALM BEACH, FL 33480		
2. Principal Place of Business <b>432 Brazilian Court</b>		3. Mailing Address <b>432 Brazilian Court</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State <b>Palm Beach, FL</b>		City & State <b>Palm Beach, FL</b>		4. FEI Number <b>65-0069640</b>	
Zip <b>33480</b> Country		Zip <b>33480</b> Country		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				04112006 Chg-P CR2E034 (11/05)	
6. Name and Address of Current Registered Agent  <b>STAMBAUGH, REGINALD G</b> <b>180 ROYAL PALM WAY</b> <b>SUITE 201</b> <b>PALM BEACH, FL 33480</b>			7. Name and Address of New Registered Agent Name <b>Charles Roddy</b> Street Address (P.O. Box Number is Not Acceptable) <b>432 Brazilian Court AVENUE</b> City <b>Palm Beach</b> <b>FL</b> Zip Code <b>33480</b>		
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  DATE <b>17 April 2006</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD RODDY, CHARLES T 180 ROYAL PALM WAY, STE 201 PALM BEACH, FL 33480	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS STAMBAUGH, REGINALD G 180 ROYAL PALM WAY #201 PALM BEACH, FL 33480	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
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 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  <b>Eduardo Roddy</b> <b>17 Apr 2006</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date and Phone #</small>					

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