2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# N00000007283

Entity Name: SUN 'N FUN FOUNDATION, INC.

Current Principal Place of Business:

4175 MEDULLA RD
LAKELAND, FL 33811

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7670
LAKELAND, FL 33807

New Mailing Address:

FEI Number: 59-3679477 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WENDEL, JOHN F
5300 SOUTH FLORIDA AVE
LAKELAND, FL 33813 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

OFFICERS AND DIRECTORS:

Title:	CD	( ) Delete
Name:	EICKHOFF, WILLIAM A	
Address:	415 15TH AVENUE NE	
City-St-Zip:	SAINT PETERSBURG, FL 33704	
Title:	SD	( ) Delete
Name:	BLAKE, WENDELL O MD	
Address:	505 MARTIN LUTHER KING JR AVE	
City-St-Zip:	LAKELAND, FL 33803	
Title:	DP	( ) Delete
Name:	EHLIS, RICHARD E	
Address:	1102 WATERFALL LANE	
City-St-Zip:	LAKELAND, FL 33803	
Title:	TD	( ) Delete
Name:	HUNTER, LEIGHTON W	
Address:	317 PARK BLVD N	
City-St-Zip:	VENICE, FL 34285	
Title:	D	( ) Delete
Name:	O'REILLY, FRANK J	
Address:	620 LAUREL LANE	
City-St-Zip:	LAKELAND, FL 33813	
Title:	ED	( ) Delete
Name:	BURTON, JOHN C	
Address:	4175 MEDULLA RD	
City-St-Zip:	LAKELAND, FL 33811	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN C BURTON ED 04/28/2006

Electronic Signature of Signing Officer or Director — Date