

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007904

FILED  
Apr 20, 2006  
Secretary of State

Entity Name: MARY'S ROOM INTERNATIONAL, INC.

## Current Principal Place of Business:

840 GEORGE BUSH BOULEVARD  
BUILDING D  
DELRAY BEACH, FL 33483

## New Principal Place of Business:

## Current Mailing Address:

840 GEORGE BUSH BOULEVARD  
BUILDING D  
DELRAY BEACH, FL 33483

## New Mailing Address:

FEI Number: 65-1059168

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

J. PATRICK FITZGERALD, ESQ.  
110 MERRICK WAY  
SUITE 3-B  
CORAL GABLES, FL 33134 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: PD ( ) Delete  
Name: GUINAN, FRANK  
Address: 840 GEORGE BUSH BOULEVARD  
City-St-Zip: DELRAY BEACH, FL 33483

Title: VD ( ) Delete  
Name: SOCKOL, TIMOTHY  
Address: 840 GEORGE BUSH BOULEVARD  
City-St-Zip: DELRAY BEACH, FL 33483

Title: TD (X) Delete  
Name: MUELLER, KATHLEEN  
Address: 797 MALLARD DRIVE  
City-St-Zip: DELRAY BEACH, FL 33444

Title: SD (X) Delete  
Name: MUELLER, GUY  
Address: 797 MALLARD DRIVE  
City-St-Zip: DELRAY BEACH, FL 33444

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SKINDELESKI, THOMAS J  
Address: 840 GEORGE BUSH BOULEVARD  
City-St-Zip: DELRAY BEACH, FL 33483

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: THOMAS J SKINDELESKI

PD

04/20/2006

Electronic Signature of Signing Officer or Director

Date