## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000001579

Entity Name: DARLYNN'S DARLINS, INC.

FILED Apr 28, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2842 ROSALIE LAKE ROAD 2842 ROSALIE LAKE ROAD LAKE WALES, FL 338989309 LAKE WALES, FL 338989309 US

**Current Mailing Address: New Mailing Address:** 

2842 ROSALIE LAKE ROAD 2842 ROSALIE LAKE ROAD LAKE WALES, FL 338989309 LAKE WALES, FL 338989309 US

FEI Number: 59-3702104 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

CZERNER, DARLYNN S 2842 ROSÁLIE LAKE ROAD LAKE WALES, FL 338989309 US

**OFFICERS AND DIRECTORS:** 

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:

Date

## Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition CZERNER, DARLYNN CZERNER, DARLYNN S Name: Name: 2842 ROSALIE LAKE ROAD Address: 2842 ROSALIE LAKE ROAD Address:

City-St-Zip: LAKE WALES, FL 338989309 City-St-Zip: LAKE WALES, FL 338989309 Title: () Delete Title: (X) Change ( ) Addition

MARTIN, CLINTON D Name: MARTIN, CLINTON D Name: Address: 2842 ROSALIE LAKE ROAD Address: 2842 ROSALIE LAKE ROAD City-St-Zip: LAKE WALES, FL 33898 City-St-Zip: LAKE WALES, FL 33898

Title: () Delete Title: (X) Change ( ) Addition DEKILDER, STEPHANIE DEKILDER, STEPHANIE Name: Name:

146 LAKEVIEW DR. Address: Address: 146 LAKEVIEW DR. City-St-Zip: HAINES CITY, FL 33844 City-St-Zip: HAINES CITY, FL 33844

Title: ( ) Delete Title: DIR (X) Change ( ) Addition KENNEDY, DEBBIE Name: Name: KENNEDY, DEBBIE

2613 NE 28TH COURT, APT 2A Address: 5651 SW 5TH ST. Address: City-St-Zip: PLANTATION, FL 33317 City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: () Delete Title: (X) Change ( ) Addition

BARAGONA, MELISSA FORLINES, JACKIE Name: Name: 401 WILDMERE AVENUE 6113 PONDEROSA ROAD Address: Address: City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: RALEIGH, NC 27612

Title: () Delete Title: ( ) Change (X) Addition

CHAMBERS, JOHN Name: Name: Address: Address: P.O. BOX 26486 AUSTIN, TX 78755 City-St-Zip: 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: DARLYNN S. CZERNER **PRES** 04/28/2006