2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002540

Entity Name: RISING TIDE INTERNATIONAL, INC.

FILED Jan 19, 2006 Secretary of State

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Current P	rincipal Place	of Business:	New Principal Place of Business:			
5102 SWIF SARASOT	FT ROAD A, FL 34231	US				
Current Mailing Address:			New Mailing Address:			
5102 SWIF SARASOT	FT ROAD A, FL 34231					
FEI Number:	65-1092932	FEI Number Applied For ()	FEI Number Not Appl	cable () Certificate	e of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Regis	stered Agent:	
BLANCH, A 520 RALPH SARASOT		US				
	named entity s of Florida.	ubmits this statement for the po	urpose of changing it	s registered office or re	gistered agent, or both,	
SIGNATUR	RE:					
	Electroni	c Signature of Registered Age	nt	С	ate	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	D () BLANCH, ANDR 520 RALPH ST SARASOTA, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () LESS, DAVID 5011 WINDWAR SARASOTA, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () LESS, ANNA 5011 WINDWAF SARASOTA, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GORMAN, SARA	EN BOULEVARD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () BAILEY, DAVID 4503 PROCTOR SARASOTA, FL		Title: Name: Address: City-St-Zip:	D (X) Change (CARL, MORRIS B 1600 WINDSOR AUSTIN, TX 78703) Addition	
Title: Name:	D () SAENGER, ROE		Title: Name:	() Change() Addition	

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.

City-St-Zip:

SIGNATURE: ANDREA BLANCH D 01/19/2006

TARPON SPRINGS, FL 34689

City-St-Zip: