2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006
Secretary of State

DOCUMENT# N02000008807

Entity Name: KREWE DU YA YA'S, INC.

Current Principal Place of Business:

PO BOX 30305
PENSACOLA, FL 32503

New Principal Place of Business:

Current Mailing Address:

PO BOX 30305
PENSACOLA, FL 32503

New Mailing Address:

FEI Number: 52-2386315 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DYRDA, SARAH ESQUIRE
220 W GARDEN ST., 9TH FLOOR
PENSACOLA, FL 32501 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: PPD ( ) Delete
Name: BEALL, PAIGE-ALISON PAST PR
Address: 5389 FLINTWOOD CIR.
City-St-Zip: PENSACOLA, FL 32504

Title: PD ( ) Delete
Name: O'CONNELL, JACQUI PRES.
Address: 4431 CHULA VISTA
City-St-Zip: PENSACOLA, FL 32504

Title: TD ( ) Delete
Name: HARTNETT, CAROLINE TREASUR
Address: 1110 E. LEE STREET
City-St-Zip: PENSACOLA, FL 32503

Title: SD ( ) Delete
Name: MERCER, CYNDI SECRETA
Address: 3400 N. 18TH AVENUE
City-St-Zip: PENSACOLA, FL 32503

Title: D (X) Delete
Name: DAVIS, SHANNON
Address: 8900 SCENIC HILLS DRIVE
City-St-Zip: PENSACOLA, FL 32514

Title: D (X) Delete
Name: MCCALL, SHELLIE
Address: 4716 HENRY WILSON CREEK DRIVE
City-St-Zip: MILTON, FL 32583

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GRIFFIN, LINDA
Address: 3906 INDIA COVE
City-St-Zip: GULF BREEZE, FL 32563

Title: PED (X) Change ( ) Addition
Name: ADAMS, BRENDA
Address: 3791 MAULE ROAD
City-St-Zip: PENSACOLA, FL 32503

Title: TD (X) Change ( ) Addition
Name: HARTNETT, CAROLINE
Address: 1110 E. LEE STREET
City-St-Zip: PENSACOLA, FL 32503

Title: SD (X) Change ( ) Addition
Name: MERCER, CYNDI
Address: 3400 N. 18TH AVENUE
City-St-Zip: PENSACOLA, FL 32503

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: CAROLINE HARTNETT TD 04/27/2006

Electronic Signature of Signing Officer or Director — Date