

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2006 8:00 am
Secretary of State

05-03-2006 90238 031 ****61.25

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05012006 Chg-NP CR2E037 (4/06)

DOCUMENT # N02000009066 1. Entity Name ENTERPRISE AMERICA, INC.																																																					
Principal Place of Business 9368 LAKE LOTTA CIRCLE ORLANDO, FL 32868 US			Mailing Address PO BOX 682252 ORLANDO, FL 32868																																																		
2. Principal Place of Business 1002 W. Latta St. Suite, Apt. #, etc.		3. Mailing Address P.O. Box 682252 Suite, Apt. #, etc.		4. FEI Number 05-0542553 Applied For <input type="checkbox"/> Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																	
City & State Orl, Florida Zip 32805 Country USA		City & State Orl, Florida Zip 32868 Country USA																																																			
6. Name and Address of Current Registered Agent BRADY, BILL 9368 LAKE LOTTA CIR. GOTHA, FL 34734																																																					
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code				8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Bill Brady</i></u> 5/1/06 <small>Signature, typed or printed name of registered agent and date if applicable (NOTE: Registered Agent signature required when reinstating)</small>																																																	
Filing Fee is \$61.25 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees				Make check payable to Florida Department of State																																															
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</th> </tr> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%; text-align: right;"><input type="checkbox"/> Delete</td> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%; text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td>ED BRADY, BILL 9368 LAKE LOTTA CIRCLE ORLANDO, FL 32868</td> <td></td> <td></td> <td>Secretary F. Mariam Menqistie 4221 Winderakes Dr. Orl, FL 32835</td> <td></td> </tr> <tr> <td></td> <td>1VP HENDERSON, SI 4401 MARTINS ORLANDO, FL 32808</td> <td><input checked="" type="checkbox"/> Delete</td> <td></td> <td>1VP Habtamu M. Zenebe 2435 Turpin Dr. Orlando, FL 32837</td> <td><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td>T MORRIS, CLIFF 9130 PRISTINE CIR ORLANDO, FL 32818</td> <td><input type="checkbox"/> Delete</td> <td></td> <td>2VP Lisa Exdrunas 604 Casa Court D Winter Springs, FL 32708</td> <td><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td>2VP ROBINSON, D.K. 6533 HAWKSMOOR DR ORLANDO, FL 32818</td> <td><input checked="" type="checkbox"/> Delete</td> <td></td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Delete</td> <td></td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Delete</td> <td></td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		ED BRADY, BILL 9368 LAKE LOTTA CIRCLE ORLANDO, FL 32868			Secretary F. Mariam Menqistie 4221 Winderakes Dr. Orl, FL 32835			1VP HENDERSON, SI 4401 MARTINS ORLANDO, FL 32808	<input checked="" type="checkbox"/> Delete		1VP Habtamu M. Zenebe 2435 Turpin Dr. Orlando, FL 32837	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		T MORRIS, CLIFF 9130 PRISTINE CIR ORLANDO, FL 32818	<input type="checkbox"/> Delete		2VP Lisa Exdrunas 604 Casa Court D Winter Springs, FL 32708	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		2VP ROBINSON, D.K. 6533 HAWKSMOOR DR ORLANDO, FL 32818	<input checked="" type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition			<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition			<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																					
SIGNATURE: <u><i>Bill Brady</i></u> 5/1/06 407 447 0930 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																					