

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009193

FILED
May 01, 2006
Secretary of State

Entity Name: ST. CLOUD PAVEMENT POUNDERS, INC.

Current Principal Place of Business:

PO BOX 700836
SAINT CLOUD, FL 34770

New Principal Place of Business:

Current Mailing Address:

PO BOX 700836
SAINT CLOUD, FL 34770

New Mailing Address:

FEI Number: 20-0367324 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SNYDER, MICHAEL D
4912 ZION DRIVE
ST CLOUD, FL 34774 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: P () Delete
Name: SNYDER, MICHAEL D
Address: 4912 ZION DR
City-St-Zip: ST CLOUD, FL 34774

Title: VP () Delete
Name: BERNETTE-SNYDER, DAYCI
Address: 4912 ZION DRIVE
City-St-Zip: ST CLOUD, FL 34774

Title: DM () Delete
Name: NYROS, JOSHUA
Address: 722 COUNTRY WOODS CIR
City-St-Zip: KISSIMMEE, FL 34744

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: BURNETTE-SNYDER, DAYCI
Address: 4912 ZION DRIVE
City-St-Zip: ST CLOUD, FL 34774

Title: DM (X) Change () Addition
Name: MOORE, MICHAEL
Address: 6978 BIG BEND DRIVE
City-St-Zip: ST. CLOUD, FL 34771

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: MICHAEL D. SNYDER

_____ Electronic Signature of Signing Officer or Director

PRES

05/01/2006

_____ Date