

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003183

FILED  
Apr 29, 2006  
Secretary of State

Entity Name: SOUTHERN CRUISERS OF FLORIDA, INC.

**Current Principal Place of Business:**

5830 DEASE ROAD  
ST. CLOUD, FL 34771

**New Principal Place of Business:**

**Current Mailing Address:**

5830 DEASE ROAD  
ST. CLOUD, FL 34771

**New Mailing Address:**

FEI Number: 52-2421440      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PRANGER, BILL  
5830 DEASE ROAD  
ST. CLOUD, FL 34771      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: PD ( ) Delete  
Name: PRANGER, BILL  
Address: 5830 DEASE ROAD  
City-St-Zip: ST. CLOUD, FL 34771

Title: VPD ( ) Delete  
Name: PERRY, RICK  
Address: 188 COUNTRY MEADOWS LANE  
City-St-Zip: ATOKA, TE 38004

Title: SD ( ) Delete  
Name: KRAUSE, RICHARD  
Address: 902 GLENWOOD  
City-St-Zip: DOTHAN, AL 36301

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VPD (X) Change ( ) Addition  
Name: KNOX, IKE  
Address: 1172 NEW HAVEN DR  
City-St-Zip: CANTONMENT, FL 32533

Title: SD (X) Change ( ) Addition  
Name: GREER, DON  
Address: 11204 GLOVER RD  
City-St-Zip: PT RICHEY, FL 34668

Title: TD ( ) Change (X) Addition  
Name: BOONE, BARBARA  
Address: 7635 SHINDLER DR  
City-St-Zip: JACKSONVILLE, FL 32222

I hereby certify that the information supplied with this filing does not qualify 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: BILL PRANGER

PD

04/29/2006

Electronic Signature of Signing Officer or Director

Date