2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002874

FILED Apr 28, 2005 Secretary of State

Entity Name: YE ENCHANTED KREWE OF BRIGADOON, INC.

Current Principal Place of Business: New Principal Place of Business:

414 W. HANNA AVE. TAMPA, FL 33604

Current Mailing Address: New Mailing Address:

414 W. HANNA AVE. TAMPA, FL 33604

FEI Number: 20-1353980 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HERBST, JOHN M 641 FIRST STREET SOUTH ST. PETERSBURG, FL 33701 US

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:

Flateria Circulus of Business I Asset

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete
 Title:
 P
 (X) Change () Addition

 Name:
 PARCHMAN, CLIFF
 Name:
 SESTAK, SCOTT

 Address:
 12753 SUNLAND CT.
 Address:
 1416 HATCHER LOOP DR.

 City-St-Zip:
 TAMPA, FL 33625
 City-St-Zip:
 BRANDON, FL 33511

Title: SEC () Delete Title: SEC (X) Change () Addition Name: FRANCIS, DANIEL Name: SCHAEFER, CHRISTINA Address: 414 W. HANNA AVE. Address: 4815 BAY HERON PLACE #605

City-St-Zip: TAMPA, FL 33604 City-St-Zip: TAMPA, FL 33616

Title: TRES () Delete Title: TRES (X) Change () Addition

Name:HOCHMAN, JASONName:KEANE, KRISTINAAddress:11806 COUNTRY COVE WAYAddress:2401 W. MORRISON AVE. #202

City-St-Zip: TAMPA, FL 33635 City-St-Zip: TAMPA, FL 33629

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SCOTT R. SESTAK PRES 04/28/2005