

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005619

FILED
Mar 08, 2005
Secretary of State

Entity Name: SECRET SANTA, INC.

Current Principal Place of Business:

5731 DUNE AVENUE
PENSACOLA, FL 32507

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 34477
PENSACOLA, FL 32507

New Mailing Address:

FEI Number: 42-1632922

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STROMQUIST, BILL
5731 DUNE AVENUE
PENSACOLA, FL 32507 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: DP () Delete
Name: STROMQUIST, BILL
Address: 5731 DUNE AVENUE
City-St-Zip: PENSACOLA, FL 32507

Title: DV () Delete
Name: YOUNG, BRIAN
Address: P.O. BOX 34477
City-St-Zip: PENSACOLA, FL 32507

Title: DS () Delete
Name: MANNING, DIANA
Address: P.O. BOX 34477
City-St-Zip: PENSACOLA, FL 32507

Title: DT () Delete
Name: ALLENBACH, CATHY
Address: P.O. BOX 34477
City-St-Zip: PENSACOLA, FL 32507

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVT (X) Change () Addition
Name: YOUNG, BRIAN
Address: P.O. BOX 34477
City-St-Zip: PENSACOLA, FL 32507

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

Title: D (X) Change () Addition
Name: BRADDOCK, JAN
Address: P.O. BOX 34477
City-St-Zip: PENSACOLA, FL 32507

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: BRIAN YOUNG

DVT

03/08/2005

Electronic Signature of Signing Officer or Director

Date