2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2006
Secretary of State

DOCUMENT# N05000004266

Entity Name: LITTLE RED WAGON FOUNDATION INC.

Current Principal Place of Business:

4428 GENTRICE DR
VALRICO, FL 33594

New Principal Place of Business:

Current Mailing Address:

4428 GENTRICE DR
VALRICO, FL 33594

New Mailing Address:

FEI Number: 20-2736631 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BONNER, ZACHARY L
4428 GENTRICE DR
VALRICO, FL 33594 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: BONNER, LAURIE
Address: 4428 GENTRICE DR
City-St-Zip: VALRICO, FL 33594

Title: VP ( ) Delete
Name: BONNER, KELLEY M
Address: 4428 GENTRICE DR
City-St-Zip: VALRICO, FL 33594

Title: VP (X) Delete
Name: MULHERIN, SUZANNE
Address: 308 W. MOORE
City-St-Zip: SEARCY, AR 72143

Title: VP ( ) Delete
Name: CHESNEY, STEPHANIE
Address: 4428 GENTRICE DR
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: BONNER, KELLEY M
Address: 4428 GENTRICE DR
City-St-Zip: VALRICO, FL 33594

Title: VP (X) Change ( ) Addition
Name: BONNER, LAURIE
Address: 4428 GENTRICE DR
City-St-Zip: VALRICO, FL 33594

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

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

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: KELLEY BONNER P 01/05/2006

Electronic Signature of Signing Officer or Director — Date