2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006441

Entity Name: THE IVY CONNECTION, INC.

FILED Sep 11, 2006 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
P.O. BOX TALLAHA	38123 SSEE, FL 323178123			
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
P.O. BOX TALLAHAS	38123 SSEE, FL 323178123			
In accordan	: 56-2552117 FEI Number Applied For() ice with s. 607.193(2)(b), F.S., the corporation of I Address of Current Registered Agent	lid not receive the prior notice.	Certificate of Status Desired () of New Registered Agent:	
1742 HILL TALLAHA	SSEE, FL 32308 US			
The above in the State	e named entity submits this statement for t e of Florida.	the purpose of changing its registere	d office or registered agent, or both,	
SIGNATUI				
	Electronic Signature of Registered	Agent	Date	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	DP () Delete WILLIAMS-COX, DIANNE 2312 MAXIS CIR. TALLAHASSEE, FL 32301	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DV () Delete DILLARD, RUTH 3108 WHIRLAWAY TRAIL TALLAHASSEE, FL 32309	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DS () Delete DUDLEY, LINETTE 861 KINGSWAY TALLAHASSEE, FL 32301	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	AS () Delete JACKSON, TANISE 6440 JUSTIN GRANT TR. TALLAHASSEE, FL 32308	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DT () Delete YOUNG, HATTIE MARY 716 LUPINE LANE TALLAHASSEE, FL 32308	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () Delete HUDSON, MARILYN 1126 GIBBS DR. TALLAHASSEE, FL 32303	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: KAREN CAMPBELL MRS. 09/11/2006