2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007257

Entity Name: HASKINS GROUP, INC.

FILED Feb 28, 2006 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|

152258 TECHNOLOGY DR. 15225 TECHNOLOGY DR. BROOKSVILLE, FL 34604 BROOKSVILLE, FL 34604

Current Mailing Address: New Mailing Address:

152258 TECHNOLOGY DR. 15225 TECHNOLOGY DR. BROOKSVILLE, FL 34604 BROOKSVILLE, FL 34604

FEI Number: 20-3100606 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:

HOLLANDER, JEFFREY 152258 TECHNOLOGY DR. BROOKSVILLE, FL 34604 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: HOLLANDER, JEFFREY Name: HOLLANDER, JEFFREY
Address: 1478 CORYDON AVENYE Address: PO BOX 15268

City-St-Zip: SPRING HILL, FL 34609 City-St-Zip: BROOKSVILLE, FL 34604

Title: S () Delete Title: D (X) Change () Addition

Name: HASKINS, BRANDY Name: MORRISON, JJ

 Address:
 7055 COVEWOOD DR.
 Address:
 12093 LUXENBOURG COURT

 City-St-Zip:
 SPRING HILL, FL 34609
 City-St-Zip:
 SPRING HILL, FL 34609

Title: D () Delete Title: () Change () Addition

 Name:
 STANINA, JAMES E
 Name:

 Address:
 P.O. BOX 6150
 Address:

 City-St-Zip:
 SPRING HILL, FL 34611
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 CONKLIN, VICTORIA
 Name:

 Address:
 P.O. BOX 6150
 Address:

 City-St-Zip:
 SPRING HILL, FL 34611
 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: JEFFREY HOLLANDER PSD 02/28/2006