

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007274

FILED
May 31, 2006
Secretary of State

Entity Name: ANAOLE INTERNATIONAL, INC.

Current Principal Place of Business:

14810 SW 170TH STREET
SUITE 100
ARCHER, FL 32618

New Principal Place of Business:

Current Mailing Address:

1008 AVENUE M
SUITE 200
HAINES CITY, FL 33844

New Mailing Address:

199 E. FLAGLER STREET
SUITE 111
MIAMI, FL 33131

FEI Number: 16-1761489 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GRAHAM, ANTHONY A
199 EAST FLAGLER STREET
SUITE 111
MIAMI, FL 33131 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: KEARSE, BRENDA J
Address: 1007 DAVIS DRIVE, SUITE 200
City-St-Zip: TAMPA, FL 33619

Title: VP () Delete
Name: GRAHAM, BEN L
Address: 275 LAUREEN LN SE, SUITE 100
City-St-Zip: MABLETON, GA 30126

Title: VP () Delete
Name: GRAHAM, ANTHONY A
Address: 199 EAST FLAGLER STREET, SUITE 111
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: A. ANTHONY GRAHAM

VP

05/31/2006

Electronic Signature of Signing Officer or Director

Date