

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009737

FILED
Jul 17, 2006
Secretary of State

Entity Name: SWAMP CABBAGE QUEEN AND PRINCESS PAGEANT, INC.

Current Principal Place of Business:

975 FORT THOMPSON AVENUE
LABELLE, FL 33935 US

New Principal Place of Business:

1120 APR HENDRY DR
LABELLE, FL 33935 US

Current Mailing Address:

975 FORT THOMPSON AVENUE
LABELLE, FL 33935 US

New Mailing Address:

1120 CAPT HENDRY DR
LABELLE, FL 33935 US

FEI Number: 03-0578424 **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:

MILLER, CATHRYN G
975 FORT THOMPSON AVENUE
LABELLE, FL 33935 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: MILLER, CATHRYN G
Address: 975 FORT THOMPSON AVENUE
City-St-Zip: LABELLE, FL 33935 US

Title: VP () Delete
Name: MERRITT, JERRI LYNN
Address: 82 MARION DRIVE
City-St-Zip: FELDA, FL 33935 US

Title: SEC () Delete
Name: ORLINSKI, MELINDA B
Address: 1120 CAPTAIN HENDRY DRIVE
City-St-Zip: LABELLE, FL 33935 US

Title: TREA () Delete
Name: HARRIS-WHITE, KIMBERLY
Address: 75 N BRIDGE STREET
City-St-Zip: LABELLE, FL 33935 US

Title: SD () Delete
Name: MILLER, CYNTHIA H
Address: 975 FORT THOMPSON AVENUE
City-St-Zip: LABELLE, FL 33935 US

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:

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: MELINDA B ORLINSKI

SEC

07/17/2006

Electronic Signature of Signing Officer or Director

Date