


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 21, 2006 8:00 am
Secretary of State

07-21-2006 90024 004 ****61.25

DOCUMENT # N05775		
1. Entity Name DANISH CLUB, INC.		

Principal Place of Business 2401 PALMETTO ST NOKOMIS, FL 34275	Mailing Address 2401 PALMETTO ST NOKOMIS, FL 34275
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50022847

2. Principal Place of Business <i>4025 Via Mirada</i>	3. Mailing Address <i>4025 Via Mirada</i>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State <i>Sarasota Fla.</i>	City & State <i>Sarasota Fla.</i>
Zip <i>34238</i>	Country <i>Sarasota</i>
Zip <i>34238</i>	Country <i>Sarasota</i>



07142006 Chg-NP CR2E037 (4/06)

4. FEI Number 59-2764992	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
KANDRUP, JYTTE <i>Kandrup Jytte</i> <i>4025 Via Mirada</i> <i>Sarasota Fla. 34238</i>	
Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

7. Name and Address of New Registered Agent	
Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Jytte Kandrup TD* *Jytte Kandrup* *7-18-06*
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE

Filing Fee is \$61.25 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HAUBRICH, ANNE 715 CARNOUSTI TERRACE VENICE, FL 34493 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PEDERSEN, ERIK 4659 STONERIDGE TRAIL SARASOTA, FL 34232 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KANDRUP, JYTTE 2401 PALMETTO ST NOKOMIS, FL 34275 <i>4025 Via Mirada</i> <i>Sarasota Fla 34238</i> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FALZON, VIBEKE 1221 SILVER LAKE COURT VENICE, FL 34292 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JENSEN, LEIF 2913 HEATHER BOW SARASOTA, FL 34235 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VENAFRO, ANNINE 2453 HIBISCUS ST SARASOTA, FL 34239 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jytte Kandrup* *Jytte Kandrup* *7-18-06* *941-927-1318*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #