2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06853

FILED Mar 15, 2006 Secretary of State

Entity Name: HUCK 'N' TOM'S ASSOCIATION, INC.

Current Principal Place of Business:

236 HUCK & TOM RD. 51 S. ANDALUSIA AVENUE

SANTA ROSA BEACH, FL 32459 SANTA ROSA BEACH, FL 32459

Current Mailing Address: New Mailing Address:

236 HUCK AND TOM RD 51 S. ANDALUSIA AVENUE SANTA ROSA BEACH, FL 32459 SANTA ROSA BEACH, FL 32459

FEI Number: 59-3639529 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:

KRAEMER, MARY ESQ 727 HIGHWAY 98 EAST DESTIN, FL 32540

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

New Principal Place of Business:

(X) Change () Addition () Delete WADDINGTON, RALPH R BENNETT, KAREN B Name: Name: Address:

236 HUCK & TOM RD. Address: 51 S. ANDALUSIA AVENUE City-St-Zip: SANTA ROSA BCH, FL 32459 City-St-Zip: SANTA ROSA BCH, FL 32459

Title: PD () Delete Title: **TRES** (X) Change () Addition

SMITH, JAMES Name: SMITH, JAMES Name:

Address: .234 HUCK & TOMS RD Address: 31428 CONIFER MTN. DR. City-St-Zip: .SANTA ROSA BCH, .F .32459 City-St-Zip: CONIFER, CO 80433

Title: VPD () Delete Title: DIR. (X) Change () Addition RUSSEL, REED BENNETT, TERRELL R Name: Name:

51 S. ANDALUSIA AVENUE Address: 266 HUCK AND TOM RD Address: City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: SD () Delete Title: DIR. (X) Change () Addition

Name: HARPSTER, MARY C Name: PAYNE, LARRY

Address: 388 HUCK AND TOM RD Address: 272 HUCK AND TOM RD City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: SANTA ROSA BEACH, FL 32459

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 BENNETT **PRES** 03/15/2006