


2006

# CORPORATION ANNUAL REPORT

**FILED**  
**May 10, 2006 8:00 am**  
**Secretary of State**

05-10-2006 90106 041 \*\*\*150.00

DOCUMENT # N07000009104 1. Entity Name KRITTER KASTLE, INC.	
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Principal Place of Business 6336 TIMBERLANE RD LAKE WALES, FL 33898	Mailing Address 6336 TIMBERLANE RD LAKE WALES, FL 33898
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**DO NOT WRITE IN THIS SPACE**

04262006 No Chg-P CR2E034 (11/05)

4. FEI Number 55-0787085	Applied For 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

*Waters*  
KLEIN, CYNTHIA J  
6336 TIMBERLANE RD  
LAKE WALES, FL 33898

**DO NOT WRITE  
IN THIS SPACE**

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 *Cynthia J. Waters* *Cynthia J. Waters* 4/28/06  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing ☐ \$5.00 May Be  
Trust Fund Contribution. Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT <i>Waters</i> KLEIN, CYNTHIA J 6336 TIMBERLANE RD LAKE WALES, FL 33898
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS CARLON, SALLY A 340 SHIRK LN SW ALBUQUERQUE, NM 87105
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COLLINS, TERESA 6340 TIMBERLANE RD. LAKE WALES, FL 33898
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 607, 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: *Cynthia J. Waters* *Cynthia J. Waters* 4/28/06  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #