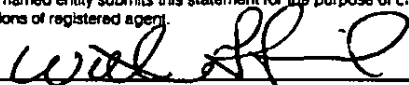
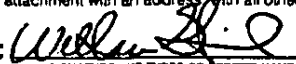


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2006 8:00 am
Secretary of State

02-15-2006 90029 035 ****61.25

DOCUMENT # N07832					
1. Entity Name VOITURE 880 LA SOCIETE DES 40 HOMMES ET 8 CHEVAUX INC.					
Principal Place of Business C/O JAMES M. WALLACE 420 OLD MAIN STREET BRADENTON, FL 34205			Mailing Address C/O JAMES M. WALLACE 420 OLD MAIN STREET BRADENTON, FL 34205		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number NOT APPLICABLE	
				Applied For Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
WALLACE, JAMES M. 420 OLD MAIN STREET BRADENTON, FL 34205			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 		Signature, typed or printed name of registered agent and title if applicable.		NOTE: Registered Agent signature required when renouncing	
Filing Fee is \$81.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	NAME	KOUDELKA, ERVIN	TITLE	PRES. RICHARD KNOX
STREET ADDRESS	1905 67TH STREET WEST	CITY-ST-ZIP	BRADENTON, FL 34209	NAME	3212 20TH AVENUE WEST
				STREET ADDRESS	BRADENTON FL 34205
				CITY-ST-ZIP	
TITLE	SD	NAME	MUNSON, JAMES	TITLE	V. PRES. RICK MARTIN JR
STREET ADDRESS	6904 MANATEE AVENUE W #478	CITY-ST-ZIP	BRADENTON, FL 34209	NAME	4419 56TH AVE TERRACE EAST
				STREET ADDRESS	BRADENTON FL 34203
				CITY-ST-ZIP	
TITLE	TD	NAME	MONTONE, FRANCIS	TITLE	TREASURER
STREET ADDRESS	6510 STONE RIVER ROAD	CITY-ST-ZIP	BRADENTON, FL 34203	NAME	ALFREDO E. NUDI
				STREET ADDRESS	6112 39TH AVE. WEST
				CITY-ST-ZIP	BRADENTON, FL 34209
TITLE	VD	NAME	SMELSER, ROBERT	TITLE	SECRETARY
STREET ADDRESS	812 W 49TH AVENUE	CITY-ST-ZIP	BRADENTON, FL 34207	NAME	WILLIAM G. FIELD
				STREET ADDRESS	3023 KIWI PLACE
				CITY-ST-ZIP	ELLENTON, FL 34222
TITLE	PD	NAME	FIELD, WILLIAM G	TITLE	
STREET ADDRESS	3023 KIWI PLACE	CITY-ST-ZIP	ELLENTON, FL 34222	NAME	
				STREET ADDRESS	
				CITY-ST-ZIP	
TITLE	SD	NAME	NUDI, ALFREDO	TITLE	
STREET ADDRESS	8222 39TH AVENUE WEST	CITY-ST-ZIP	BRADENTON, FL 34209	NAME	
				STREET ADDRESS	
				CITY-ST-ZIP	
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: 		Signature, typed or printed name of signing officer or director		Date: Jan 30, 06	
				Daytime Phone #	