2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 11, 2006 8:00 am Secretary of State

Principal Place of Business #1 OFFICE DRIVE BRADENTON, FL 34208 US #2. Principal Place of Business Suite, Apt. #, etc. Mailing Address #1 OFFICE DRIVE BRADENTON, FL 34208 US 60027039 60027039 60027039 60027039 60027039 60027039 60027039 60027039 60027039 60027039
Suite, Apt. #, etc. 04062006 Chg-NP CR2E037 (11/05)
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City & State City & State 4. FEI Number Applied 59-0184075 Not Appl
Zip Country Zip Country 5. Certificate of Status Desired 58.75 Additional Fae Required Fae Required
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent
Name
HARRISON, THOMAS W 1206 MANATEE AVE. WEST BRADENTON, FL 34205 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 a the obligations of registered agent.
SIGNATURE Signature Signa
Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to
Due by May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State
10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
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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.

CALONY DE NEFF AST MED 4-6-06 941-746-7700
OF BIGHIRD OFFICER OR DIRECTOR
DOTING Phone 9