2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14902

FILED May 02, 2006 Secretary of State

Entity Name: MILITARIA COLLECTORS SOCIETY OF FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

PO BOX 100846 140 N.E. 55 STREET

FORT LAUDERDALE, FL 333100846 US FORT LAUDERDALE, FL 33334 US

Current Mailing Address: New Mailing Address:

PO BOX 343133

FLORIDA CITY, FL 33034 US

FEI Number: 65-0117155 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MARQUETTE, RICKIE L. 14481 S.W. 289TH TERRACE LEISURE CITY, FL 33033 US

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:

Chattagia Circathura of Davistana d Araut

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 RIZZO, STEVE
 Name:
 RIZZO, STEVE

 Address:
 1710 S.W. 97 AVE.
 Address:
 1710 S.W. 97 AVE.

 City-St-Zip:
 MIRAMAR, FL 33025
 City-St-Zip:
 MIRAMAR, FL 33025

Title: DP () Delete Title: P/D (X) Change () Addition

 Name:
 MARQUETTE, RICKIE
 Name:
 MARQUETTE, RICKIE

 Address:
 14481 SW 289 TERR
 Address:
 14481 SW 289 TERR

 City-St-Zip:
 LEISURE CITY, FL
 City-St-Zip:
 LEISURE CITY, FL

Title: D () Delete Title: () Change () Addition

 Name:
 ADDE, TIM
 Name:

 Address:
 2158 N.E. 183 ST
 Address:

 City-St-Zip:
 N MIAMI BEACH, FL 33179
 City-St-Zip:

Title: SD () Delete Title: S/D (X) Change () Addition

 Name:
 JACOBUS, JON
 Name:
 JACOBUS, JON

 Address:
 140 N.E. 55TH ST
 Address:
 140 N.E. 55TH ST

 City-St-Zip:
 FT. LAUDERDALE, FL
 City-St-Zip:
 FT. LAUDERDALE, FL

 $\text{Title:} \qquad \text{DV} \qquad (\) \ \text{Delete} \qquad \qquad \text{Title:} \qquad \text{D} \qquad (\text{X}) \ \text{Change} \ (\) \ \text{Addition}$

 Name:
 LAMBERTO, BRUCE
 Name:
 LAMBERTO, BRUCE

 Address:
 3420 E 165 ST
 Address:
 3420 E 165 ST

City-St-Zip: NORTH MIAMI BEACH, FL 33160 City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: DT () Delete Title: T/D (X) Change () Addition

 Name:
 MCBRIDE, JIM
 Name:
 MCBRIDE, JIM

 Address:
 3002 NW 116 AVE
 Address:
 3002 NW 116 AVE

City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: CORAL SPRINGS, FL 33065

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: RICKIE L. MARQUETTE P/D 05/02/2006