

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 03, 2006
Secretary of State**

DOCUMENT# N16115

Entity Name: FLORIDA INDEPENDENT FILM & VIDEO, INC.

Current Principal Place of Business:

PMB 163
2457 A S HIAWASSEE RD
ORLANDO, FL 32835

New Principal Place of Business:

Current Mailing Address:

PMB 163
2457 A S HIAWASSEE RD
ORLANDO, FL 32835

New Mailing Address:

FEI Number: 59-2708954 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SUCHY, BILL
5367 ABELIA DRIVE
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SUCHY, BILL
Address: 5367 ABELIA DRIVE
City-St-Zip: ORLANDO, FL 32819

Title: DST () Delete
Name: SUCHY, JOYCE
Address: 5367 ABELIA DRIVE
City-St-Zip: ORLANDO, FL 32819

Title: D (X) Delete
Name: VOCIA, DAN
Address: 2115 KILIMANJARO COURT
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BILL SUCHY

PRES

04/03/2006

Electronic Signature of Signing Officer or Director

_____ Date