## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N27805

FILED Apr 27, 2006 Secretary of State

Entity Name: LES GRANDES DAMES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1705 LYNDALE BLVD MAITLAND, FL 32751 US **Current Mailing Address: New Mailing Address:** PO BOX 2851 WINTER PARK, FL 32790 FEI Number: 59-2998724 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: YOUNG, KERRY 1705 LYNDALE BLVD MAITLAND, FL 32751 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition YOUNG, KERRY Name: Name: 1705 LYNDALE BLVD Address: Address: City-St-Zip: MAITLAND, FL 32751 US City-St-Zip: Title: VD Title: VD ( ) Delete (X) Change ( ) Addition COOK, CANDY Name: COOK, CANDY Name: Address: 5708 NW 27TH PL Address: 2463 RIVERTREE CIRLCE City-St-Zip: GAINESVILLE, FL 32606 City-St-Zip: SANFORD, FL 32771 Title: () Delete Title: (X) Change ( ) Addition LALIBERTE, CLAUDETTE LALIBERTE, CLAUDETTE Name: Name: 1140 S. ORLANDO AVE, I-4 Address: Address: 3969 HAYNES CIRCLE City-St-Zip: MAITLAND, FL 32751 City-St-Zip: CASSELBERRY, FL 32707 ( ) Delete Title: 2VP Title: () Change () Addition REED, NANCY Name: Name: 1122 WASHINGTON AVE Address: Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: Title: () Delete Title: () Change () Addition PLANTE, MARYANN Name: Name: 915 N. KENTUCKY AVE Address: Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition BURMESTER, ALEXINA HOLLYDAY, ALEXINA Name: Name: Address: 1601 FLAMINGO DRIVE Address: 1601 FLAMINGO DRIVE ORLANDO, FL 32803 ORLANDO, FL 32803 City-St-Zip: 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: KERRY YOUNG P 04/27/2006