

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38753

FILED
Mar 15, 2006
Secretary of State

Entity Name: KREWE OF DOMINIQUE YOUX, INC.

Current Principal Place of Business:

BAY POINT BOX 27164
PANAMA CITY, FL 32411 US

New Principal Place of Business:

Current Mailing Address:

BAY POINT BOX 27164
PANAMA CITY, FL 32411 US

New Mailing Address:

FEI Number: 59-2891980

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINDHOLM, FRED
3050 W. 30TH COURT
PANAMA CITY, FL 32405 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: P () Delete
Name: DUNAWAY, JOHN
Address: P.O. BOX 10225
City-St-Zip: PANAMA CITY, FL 32411

Title: VP () Delete
Name: LEDMAN, THOMAS
Address: 511 HOLLIS AVENUE
City-St-Zip: PANAMA CITY, FL 32401

Title: T () Delete
Name: JUCHINEIWICZ, JOHN
Address: 124 RIDGECREST CT
City-St-Zip: PANAMA CITY, FL 32405

Title: S () Delete
Name: LEINHOP, ROB
Address: P.O. BOX 28166
City-St-Zip: PANAMA CITY, FL 32411

Title: D () Delete
Name: HUTT, TRAY
Address: 1413 COUNTRY CLUB DRIVE
City-St-Zip: LYNN HAVEN, FL 32444

Title: D () Delete
Name: VALEZ, JOSE
Address: P.O. BOX 28293
City-St-Zip: PANAMA CITY, FL 32411

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:

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

Title: D (X) Change () Addition
Name: HUTT, TREY
Address: P O BOX 2550
City-St-Zip: PANAMA CITY, FL 32405

Title: D (X) Change () Addition
Name: VELEZ, JOSE
Address: P.O. BOX 28293
City-St-Zip: PANAMA CITY, FL 32411

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: TREY HUTT

D

03/15/2006

Electronic Signature of Signing Officer or Director

Date