

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47910

FILED
Feb 13, 2006
Secretary of State

Entity Name: SUN 'N FUN VETTES, INC.

Current Principal Place of Business:

14722 SAN MARSALA
TAMPA, FL 33626 US

New Principal Place of Business:

17319 SIMMONS RD
LUTZ, FL 33548 US

Current Mailing Address:

P O BOX 272311
TAMPA, FL 33688 US

New Mailing Address:

FEI Number: 59-3112050 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KLINE, STEVE
17319 SIMMONS RD
LUTZ, FL 33549 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: VPD () Delete
Name: NEAL, DEBBIE
Address: 815 AMBASSADOR LOOP
City-St-Zip: TAMPA, FL 33613

Title: P () Delete
Name: KELLY, REX
Address: 35019 DOLPHIN LAKE DR.
City-St-Zip: ZEPHRYHILLS, FL 33541

Title: D () Delete
Name: KLINE, STEVE
Address: 17319 SIMMONS RD
City-St-Zip: LUTZ, FL 33549

Title: ED () Delete
Name: PERKINS, TOM
Address: 14722 SAN MARSALS CT
City-St-Zip: TAMPA, FL 33626

Title: S () Delete
Name: RANAHAN, DEBBIE
Address: 14112 FENNSBURY DR
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: RANAHAN, DEBRA
Address: 14112 FENNSBURY DR.
City-St-Zip: TAMPA, FL 33624

Title: P (X) Change () Addition
Name: ROSE, ROBERT
Address: 18503 KINGBIRD DR.
City-St-Zip: LUTZ, FL 33558

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

Title: ED (X) Change () Addition
Name: MCNAIR, JERRY
Address: 30332 GLENHAM CT.
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: S (X) Change () Addition
Name: CARROLL, CAROL
Address: 6960 QUAIL HOLLOW BLVD.
City-St-Zip: WESLEY CHAPEL, FL 33544

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: STEPHEN J. KLINE

D

02/13/2006

Electronic Signature of Signing Officer or Director

Date