2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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Feb 17, 2006 8:00 am
Secretary of State
02-17-2006 90079 048 ****61.25

FINING PLACE OF BUSINESS 8. Maring Address of ENRINOW FALLS DRIVE ORMOND BEACH, FL 32174 US 8. Maring Address of Current Registered Agent Coy & State Coy & S	1. Entity Nam	MENT # N48382 A BEACH 154, INC.									79 048 ***	
Suite, Apt. 4, etc. Cary & State Charter Cary & State Chy & State Chy & State Chy & State Churchy Country Country Country Country Country S. Certificate of States Desired S8.75 Additional Fee Amount of September 1 of Sea and Address of Current Registered Agent T. Name and Address of New Registered Agent T. Name and Address of New Registered Agent Chy FL Zip Code	6 RAINBOW	FALLS DRIVE	6 RA	INBOW FALLS DRIV		US			٠.		- :	'3 111 2: 91 113 1
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S. Name and Address of Current Registered Agent T. Name and Address of New Registered Agent T. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE FILING Fee is \$61.25 Due by May 1, 2006 PEECHO AND DIRECTORS 9. Election Campaign Financing Trust Fund Contribution. NOTE Required Agent screams received when necessary) DATE FILING Fee is \$61.25 Due by May 1, 2006 POFCERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10. TITLE UP BRANSFORD, THOMAS STREET MORESS OUTH-S1-2P DELAND, FL. 32720 OUTH-S1-2P CITY-S1-2P CITY-S1-2P CITY-S1-2P DAY ON HINNESOTA A VE. CITY-S1-2P CITY-S1-2P CITY-S1-2P ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10. CITY-S1-2P CITY-S1-2P ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10. CITY-S1-2P CITY-S1-2P ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10. CITY-S1-2P CITY-S1-2P ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10. CITY-S1-2P CITY-S1-2P ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10. CITY-S1-2P CITY-S1-2P ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10. CITY-S1-2P CITY-S1-2P ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10. CITY-S1-2P CITY-S1-2P ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10. CITY-S1-2P CITY-S1-2P ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10. CITY-S1-2P CITY-S1-2P ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10. CITY-S1-2P CITY-S1-2P ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10. CITY-S1-2P CITY-S1-2P ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10. CITY-S1-2P CITY-S1-2P ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10. CITY-S1-2P CITY-S1-2P ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10. CITY-S1-2P CITY-S1-2P ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	City & Stat	ө	Ci	ty & State							⊢	
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STORMAND BEACH, FL 32174 Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature Separate, fixed or printed rate of imposed agent and this isolateate. (NOTE, Registered Agent separate required when revisitation) DATE		6. Name and Address of Current	Register	ed Agent		Nome		7. Name and	Address of New	w Registen	ed Agent	
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CITY-ST-ZIP EDGEWATER, FL 32141

CITY-ST-ZIP Drynam Beau, FL 32114

12. I hereby certify that the information supplied with this lifting does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all/other like empowered.

SIGNATURE:

William Fromis SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Z/2/06 (386) 673-5180