## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000003419

FILED Apr 19, 2006 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
2809 BAYI TAMPA, F	POINTE CIRC L 33611	LE		
Current Mailing Address:		New Mailing Address:		
502 N ARI TAMPA, F	MENIA AVE L 33609			
FEI Number	: 59-3198062	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:		
KOEHLER 502 N ARI TAMPA, F	MENIA AVE	S		
502 N ARI TAMPA, F The above	MENIA AVE L 33609 U	-	purpose of changing its registere	ed office or registered agent, or both,
502 N ARI TAMPA, F The above	MENIA AVE L 33609 U e named entity e of Florida.  RE:	submits this statement for the		
502 N ARI TAMPA, F The above in the State SIGNATU	MENIA AVE L 33609 U e named entity e of Florida.  RE:Electro	submits this statement for the	gent	Date
502 N ARI TAMPA, F The above in the State SIGNATU	MENIA AVE L 33609 U e named entity e of Florida.  RE:	submits this statement for the	gent  ADDITIONS/CHANG	Date ES TO OFFICERS AND DIRECTOR
502 N ARI TAMPA, F The above in the State SIGNATUI  OFFICER Title:	MENIA AVE L 33609 U e named entity e of Florida.  RE: Electro S AND DIRECTO (	submits this statement for the nic Signature of Registered Agerones:  ) Delete	gent  ADDITIONS/CHANG  Title:	Date
502 N ARI TAMPA, F The above in the State SIGNATUE	MENIA AVE L 33609 U e named entity e of Florida.  RE: Electro S AND DIREC	submits this statement for the nic Signature of Registered Actions:  ) Delete	gent  ADDITIONS/CHANG	Date ES TO OFFICERS AND DIRECTOR
502 N ARI TAMPA, F The above in the State SIGNATUI  OFFICER Title: Name:	MENIA AVE L 33609 U e named entity e of Florida.  RE: Electro S AND DIRECTO KOEHLER, KE	submits this statement for the nic Signature of Registered Actors:  ) Delete cith Ave	gent  ADDITIONS/CHANG  Title:  Name:	Date ES TO OFFICERS AND DIRECTOR
502 N ARI TAMPA, F The above in the State SIGNATUE  OFFICER  Title: Name: Address: City-St-Zip:	MENIA AVE L 33609 U e named entity e of Florida.  RE: Electro  S AND DIREC  TD ( KOEHLER, KE 502 ARMENIA TAMPA, FL 33	submits this statement for the nic Signature of Registered Actors:  ) Delete HTH AVE 3609	gent  ADDITIONS/CHANG  Title: Name: Address:	Date SES TO OFFICERS AND DIRECTOR ( ) Change ( ) Addition
502 N ARI TAMPA, F The above in the State SIGNATUI  OFFICER  Title: Name: Address: City-St-Zip: Title:	MENIA AVE L 33609 U e named entity e of Florida.  RE: Electro  S AND DIREC  TD ( KOEHLER, KE 502 ARMENIA TAMPA, FL 33	submits this statement for the nic Signature of Registered Actors:  ) Delete EITH AVE 8609 ) Delete	gent  ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:	Date ES TO OFFICERS AND DIRECTOR
502 N ARI TAMPA, F The above in the State SIGNATUI  OFFICER  Title: Name: Address: City-St-Zip: Title: Name: Address:	MENIA AVE L 33609 U e named entity e of Florida.  RE: Electro  S AND DIREC  TD ( KOEHLER, KE 502 ARMENIA TAMPA, FL 33  SD ( CLARK-STILLI 502 N ARMEN	submits this statement for the nic Signature of Registered Agertors:  ) Delete EITH AVE 3609 ) Delete E, CARINA IA AVE	ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date SES TO OFFICERS AND DIRECTOR ( ) Change ( ) Addition
502 N ARI TAMPA, F The above in the State SIGNATUI  OFFICER Title: Name: Address:	MENIA AVE L 33609 U e named entity e of Florida.  RE: Electro  S AND DIREC  TD ( KOEHLER, KE 502 ARMENIA TAMPA, FL 33  SD ( CLARK-STILLI	submits this statement for the nic Signature of Registered Agertors:  ) Delete EITH AVE 3609 ) Delete E, CARINA IA AVE	gent  ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name:	Date SES TO OFFICERS AND DIRECTOR ( ) Change ( ) Addition
502 N ARI TAMPA, F The above in the State SIGNATUI  OFFICER  Title: Name: Address: City-St-Zip: Title: Name: Address:	MENIA AVE L 33609 U e named entity e of Florida.  RE: Electro S AND DIREC TD ( KOEHLER, KE 502 ARMENIA TAMPA, FL 33 SD ( CLARK-STILLI 502 N ARMEN TAMPA, FL 33	submits this statement for the nic Signature of Registered Agertors:  ) Delete EITH AVE 3609 ) Delete E, CARINA IA AVE	ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date SES TO OFFICERS AND DIRECTOR ( ) Change ( ) Addition
502 N ARI TAMPA, F The above in the State SIGNATUI  OFFICER  Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	MENIA AVE L 33609 U e named entity e of Florida.  RE: Electro S AND DIREC TD ( KOEHLER, KE 502 ARMENIA TAMPA, FL 33 SD ( CLARK-STILLI 502 N ARMEN TAMPA, FL 33	submits this statement for the nic Signature of Registered Age TORS:  ) Delete SITH AVE 3609  ) Delete E, CARINA IA AVE 3609 ) Delete	ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address: City-St-Zip:	Date  EES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition  ( ) Change ( ) Addition

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: KEITH W KOEHLER 04/19/2006 D