2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 26, 2006 8:00 am Secretary of State DOCUMENT # N93000004441 1. Entity Name 04-26-2006 90184 048 ****61.25 NEW GOLDEN KEY CLUB, INC. Principal Place of Business Mailing Address 2840 WINDSOR LANE 2840 WINDSOR LANE MARIANNA FL 32446 MARIANNA FL 32446 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (10/05) 1st MOORE City & State Applied For City & State 4. FEI Number 59-3209991 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Robinson ELLIS, EDDIE L Street Address (P.O. Box Number is Not Acceptable) 2840 WINDSOR LANE MARIANNA FL 32446 **Mraham** Street Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) DATE Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PD PD' Delete TITE F Addition Amos Robinson 4282 Brahamst Amos ELLIS, EDDIE LEE NAME 2840 WINDSOR LANE STREET ADDRESS STREET ADDRESS MARIANNA FL 32446 CITY-ST-ZIP CITY-ST-ZIP VD 🙇 Delete Addition TITLE TITLE wilson Liroy Wilson Road BAKER, GEORGE NAME NAME 3751 2838 BARNES ST. STREET ADDRESS STREET ADDRESS Marann Ila. 32448 MARIANNA FL 32446 CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE Danny Sylvester NAME SYLVESTER, DANNY NAME +324 woodberng Rd STREET ADDRESS 4324 WOODBERRY RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MARIANNA FL 32448 Change **Addition** TITLE TD TITLE **X** Delete NAME ELLIS, EDDIE L NAME STREET ADDRESS 2840 WINDSOR LANE STREET ADDRESS MARIANNA FL 32446 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE ROBINSON, WALTER NAME NAME 4222 ROULHAS ST STREET ADDRESS STREET ADDRESS MARIANNA FL CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STRÉET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

FILED

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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