2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003924

Entity Name: INROADS/CENTRAL FLORIDA, INC.

FILED Jan 31, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3751 MAGUIRE BLVD SUITE 206 ORLANDO, FL 32803 US **New Mailing Address: Current Mailing Address:** 10 SOUTH BROADWAY 10 SOUTH BROADWAY SUITE 700 SUITE 300 SAINT LOUIS, MO 63102 US SAINT LOUIS, MO 63102 US FEI Number: 43-1676405 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: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BELL, SEKENNIA Name: Name: 8427 SOUTHPARK CIRCLE Address: Address: City-St-Zip: ORLANDO, FL 32819 City-St-Zip: Title: CD () Delete Title: () Change () Addition CARRION, LORI Name: Name: Address: 555 LAKE BORDER DRIVE Address: City-St-Zip: APOPKA, FL 32703 US City-St-Zip: Title: CFO () Delete Title: () Change () Addition COULIS, THEO Name: Name: 10 SOUTH BROADWAY STE 300 Address: Address: City-St-Zip: ST LOUIS, MO 63102 City-St-Zip: Title: MD () Delete Title: () Change () Addition Name: SMITH, RICHARD Name: 3751 MAGUIRE BLVD, SUITE 206 Address: Address: City-St-Zip: ORLANDO, FL 32803 City-St-Zip: Title: () Delete Title: () Change () Addition GARCIA, LILLIAN Name: Name: 14901 SOUTH ORANGE BLOSSOM TRAIL Address: Address: City-St-Zip: ORLANDO, FL 328022353 City-St-Zip: Title: () Delete Title: () Change () Addition ALCORN, DEBI Name: Name: Address: 1940 TRAYLOR BLVD Address: ORLANDO, FL 328047 City-St-Zip: City-St-Zip:

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: THEO COULIS CFO 01/31/2006