2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005244

FILED Jan 18, 2006 Secretary of State

Entity Name: FLORIDA AGRICULTURAL HALL OF FAME FOUNDATION, INC.

4500 0 414	Current Principal Place of Business:			New Principal Place of Business:	
4508 OAK	FAIR BLVD				
STE 290 TAMPA, F	L 33610 US				
Current Mailing Address:			New Maili	New Mailing Address:	
	FAIR BLVD				
STE 290 TAMPA, F	L 33610 US				
FEI Number:	: 59-3280221	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
4508 ÓAK STE 290	HARLES R. FAIR BLVD L 33610 US				
	named entity s e of Florida.	ubmits this statement for the p	urpose of changing i	its registered office or registered agent, or both,	
SIGNATUI					
	Electroni	c Signature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:			ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	T () SMITH, CHARLE 10394 WALLIEN BROOKSVILLE,	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () BROWN, REGG P O BOX 14063 ORLANDO, FL 3	5	Title: Name: Address: City-St-Zip:	P (X) Change () Addition BROWN, REGGIE 800 TRAFALGAR COURT, SUITE 300 ORLANDO, FL 328140635	
Title: Vame:	D () HUGHES, TOM 1311 S. HOWAF	Delete D AVE.	Title: Name: Address: City-St-Zip:	S (X) Change () Addition HUGHES, TOM 345 BAYSHORE BLVD. #1013 TAMPA, FL 33606	
Address: City-St-Zip:	TAMPA, FL		City-St-Zip.	773111 73, 1 2 00000	
Address:		≣EΤ	Title: Name: Address: City-St-Zip:	() 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: CHARLES R. SMITH T 01/18/2006