2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N95000001555

1. Entity Name



FILED Apr 19, 2006 8:00 am Secretary of State

04-19-2006 90099 019 ****61.25

FLORIDA	INC.	OH OF WAOCHOLA,							
207 NORTH 7TH AVENUE 207		Mailing Address 207 NORTH 7TH AVENU WAUCHULA, FL 33873	E) (7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	640 664 664 6		11 1 0 101 1 101 1	
2. Principal Place of Business 3. M		3. Mailing Address	J. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		01042006 C	hg-NP	CR2E0	37 (11/05)	
City & State		City & State	City & State		4. FEI Number 65-062563	34		<u> </u>	pplied For lot Applicable
Zip	Country	Zip	Country		5. Certificate of S	tatus Desired		\$8.75 Ac Fee Requir	
	6. Name and Address of Current	Registered Agent	Name		7. Name and Add	irese of New	Registered	Agent	
STENSTROM, CARL H 2220 U.S. HIGHWAY 17 SOUTH				Address (P.	O. Box Number Is	Not Acceptat	ole)		
	LA, FL 33873					·			
			City				FL	Zip Co	de
	named entity submits this statement for	or the purpose of changing its i	egistered office o	or registere	ed agent, or both, in	the State of F			, and accept
the obligat	ions of registered agent.								İ
SIGNATURE .	Signeture, typed or preted name of registered agent	and title if applicable. (NOTE:	Registered Agent signal	there required v	when remessing)		DATE		
SIGNATURE .	Signature, typed or preted name of registered agent. Filling Fee is \$61.25 Due by May 1, 2006	and trie if applicable. (NOTE: 9. Election Carr Trust Fund C	paign Financing		\$5.00 May Be Added to Fees		DATE Make chec orida Depa		
SIGNATURE .	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DI	9. Election Carr Trust Fund C	paign Financing		\$5.00 May Be	FIG	Make chec orida Depa	rtment of I	State N 10
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I hereby certify that the information supplied with this filing 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 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: MONTH AND ARREST OF THE OF THE PROPERTY OF THE