

FILED
Mar 15, 2006 8:00 am
Secretary of State

DOCUMENT # N95000002994

Mailing Address

19526 GULF BLVD
1D
INDIAN SHORES, FL 33785 US

DO NOT WRITE IN THIS SPACE



CR2E037 (11/05)

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**DO NOT WRITE
IN THIS SPACE**

MILLER, ANNE F
19526 GULF BLVD. 1-D
INDIAN SHORES, FL 33785

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 reinstating)

DATE _____

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	TD
NAME	MILLER, ANNE F
STREET ADDRESS	19526 GULF BLVD. 1-D
CITY-ST-ZIP	INDIAN SHORES, FL 33785

TITLE	PD
NAME	AUCHTER, EUGENE
STREET ADDRESS	19526 GULF BLVD 3F
CITY-ST-ZIP	INDIAN SHORES, FL 33785

TITLE	D DEUEL
NAME	DEUEL, LARRY
STREET ADDRESS	19526 GULF BLVD 2-B
CITY-ST-ZIP	INDIAN SHORES, FL 33785

TITLE	D
NAME	GERECKE, ED
STREET ADDRESS	19526 GULF BLVD 2C
CITY - ST - ZIP	INDIAN ROCKS BEACH, FL 33785

TITLE	SD
NAME	COLEMAN, PAT
STREET ADDRESS	19526 GULF BLVD, #2D
CITY-ST-ZIP	INDIAN SHORES, FL 33785

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. 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 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: Anne F. Miller ANNE F. MILLER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/06 727 593-3000