2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000547

City-St-Zip:

PENSACOLA, FL 32504

Entity Name: KREWE OF SEVILLE INC.

FILED Jan 04, 2006 Secretary of State

| Entity Nai | me: KREWE | OF SEVILLE, INC. | | | |
|---|---|---|--|--|--|
| Current Principal Place of Business: | | | New Principal Place of Business: | | |
| | VERNMENT S DLA, FL 32501 | | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| PO BOX 1 PENSACC | 2172 DLA, FL 32591 | | | | |
| FEI Number | : 59-3544403 | FEI Number Applied For() | FEI Number Not Appl | licable () Certificate of Status Desired () | |
| Name and | l Address of C | urrent Registered Agent: | Name and | Address of New Registered Agent: | |
| 130 EAST | ., WILMER H GOVERNMEN DLA, FL 32501 | IT STREET US | | | |
| | named entity : e of Florida. | submits this statement for the | purpose of changing i | its registered office or registered agent, or both, | |
| SIGNATUI | RE: | | | | |
| | Electror | ic Signature of Registered Ag | ent | Date | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | D () MITCHELL, DO 914 FAIRWAY PENSACOLA, F | DRIVE | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | MCADAMS, CE 751 PENSACO | Delete CILIA LA BEACH BLVD., #6-F EACH, FL 32561 | Title: Name: Address: City-St-Zip: | DT (X) Change () Addition PRATOFIORITO, PAUL 4025 MONTALVO DRIVE PENSACOLA, FL 32504 | |
| Title: Name: Address: City-St-Zip: | D () MITCHELL, BU 2006 E JORDA PENSACOLA, F | N STREET | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | DT () CHAVIS, EVEL 2430 TRONJO PENSACOLA, F | CIRCLE | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: | DT () DICKSON QUIN 2950 MEREDIT | • | Title: Name: Address: | () 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.

City-St-Zip:

SIGNATURE: PAUL PRATOFIORITO TREA 01/04/2006