

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001414

FILED
Apr 23, 2006
Secretary of State

Entity Name: FLORIDA SKUNKS AS PETS, INC.

Current Principal Place of Business:

1340 NE 47TH STREET
FT.LAUDERDALE, FL 33334

New Principal Place of Business:

Current Mailing Address:

1340 NE 47TH STREET
FT.LAUDERDALE, FL 33334

New Mailing Address:

FEI Number: 65-0936621

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLLENBACK, LANA
14338 CRISTOBAL STREET
FT.MYERS, FL 339052335 US

Name and Address of New Registered Agent:

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:

Title: TED () Delete
Name: BUTLER, LYNDA
Address: 1340 NE 47TH STREET
City-St-Zip: FT.LAUDERDALE, FL 33334

Title: TS () Delete
Name: COBER, LISA
Address: 1900 BOTREE CT
City-St-Zip: DAYTONA BEACH, FL 32124

Title: TT () Delete
Name: COBER, KEITH
Address: 1900 BOTREE CT
City-St-Zip: DAYTONA BEACH, FL 32124

Title: T () Delete
Name: HOLLENBACK, LANA
Address: 14338 CRISTOBAL ST
City-St-Zip: FORT MYERS, FL 33905

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: LYNDA BUTLER

TED

04/23/2006

Electronic Signature of Signing Officer or Director

Date