2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004521

FILED Mar 30, 2005 Secretary of State

Entity Name: SPECIAL EVENTS FOR MEXICO BEACH, INC.

Current Principal Place of Business: New Principal Place of Business:

PEGGY WOOD LYNN MARSHALL P O BOX 13382 P O BOX 13382

MEXICO BEACH, FL 32410 MEXICO BEACH, FL 32410

Current Mailing Address: New Mailing Address:

PEGGY WOOD LYNN MARSHALL P O BOX 13382 P O BOX 13382

MEXICO BEACH, FL 32410 MEXICO BEACH, FL 32410

FEI Number: 59-3643163 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WOOD, PEGGY
105 N 31 STREET
102 CANAL PARKWAY
MEXICO BEACH, FL 32410 US
MEXICO BEACH, FL 32456 US

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: LYNN MARSHALL 03/30/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PD () Delete Title: PD (X) Change () Addition

 Name:
 WOOD, PEGGY
 Name:
 LYNN, MARSHALL

 Address:
 PO BOX 13382
 Address:
 PO BOX 13382

 City-St-Zip:
 MEXICO BCH, FL 32410
 City-St-Zip:
 MEXICO BCH, FL 32410

 Title:
 VPD () Delete
 Title:
 VPD (X) Change () Addition

 Name:
 COSTIN, LYNN
 Name:
 MARQUARDT, CHRYSTINA

 Address:
 PO BOX 13382
 Address:
 PO BOX 13382

 City-St-Zip:
 MEXICO BCH, FL 32410
 City-St-Zip: MEXICO BCH, FL 32410

Title: TD () Delete Title: TD (X) Change () Addition Name: SHEEDER, BERNICE Name: SHAWNA, WOOD

Address: P.O. BOX 13382 Address: P.O. BOX 13382

City-St-Zip: MEXICO BEACH, FL 32410 City-St-Zip: MEXICO BEACH, FL 32410

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LYNN MARSHALL PD 03/30/2005