

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000046123

FILED
Jan 06, 2006
Secretary of State

Entity Name: SHOWCASE PROPERTIES OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

7681 NW U.S. HWY 27
OCALA, FL 34482

New Principal Place of Business:

1131 EAST SILVER SPRINGS BLVD
OCALA, FL 34470

Current Mailing Address:

7681 NW U.S. HWY 27
OCALA, FL 34482

New Mailing Address:

1131 EAST SILVER SPRINGS BLVD
OCALA, FL 34470

FEI Number: 59-3650508

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICILCAVAGE, JOLENE C
5188 NW 76TH CT
OCALA, FL 344822072 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DAUGHERTY, AMANDA L
Address: 4533 NW 78TH AVENUE
City-St-Zip: OCALA, FL 34482

Title: S/T () Delete
Name: DAUGHERTY, AMANDA L
Address: 4533 NW 78TH AVENUE
City-St-Zip: OCALA, FL 34482

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AMANDA L. DAUGHERTY

PRES

01/06/2006

Electronic Signature of Signing Officer or Director

Date