


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2006 08:00 AM
Secretary of State

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| DOCUMENT # PO1000047497 |  |
| 1. Entity Name BIG AIR SKATE PARK, CO. | |

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| Principal Place of Business 2601 E. OLIVE RD. PENSACOLA, FL 32514 | Mailing Address 5869 WESTMONT RD. MILTON, FL 32583 |
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01242006 No Chg-F CRZE034 (11/05)

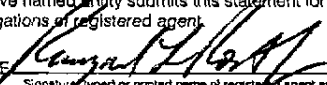
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| 4. FEI Number 59-3732940 | Applied For <input type="checkbox"/> Not Applicable |
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| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent ROSTORFER, RAYMOND L 5849 WESTMONT RD. MILTON, FL 32583 |
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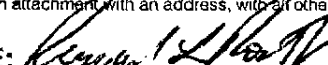
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| 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. | | |
| SIGNATURE  | Raymond L. Rostorfer Pres | DATE 1-26-06 |
| <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | | |

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DPS ROSTORFER, RAYMOND L 2601 E. OLIVE RD. PENSACOLA, FL 32514 |
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02/27/06-80006-014 150.00

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| 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 607, 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:  | Raymond L. Rostorfer 1-26-06 850 485 6352 |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | |