

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000035637

FILED
Feb 23, 2006
Secretary of State

Entity Name: M & D HANKE ENTERPRISES, INC.

Current Principal Place of Business:

10700 HWY 301 SOUTH
HAMPTON, FL 32044

New Principal Place of Business:

1509 E. BROWNLEE STREET
STARKE, FL 32091

Current Mailing Address:

1620 S. POPE LICK RD
LOUISVILLE, KY 40299

New Mailing Address:

4610 HOPEWELL RD
LOUISVILLE, KY 40299 50

FEI Number: 32-0021210

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANKE, MICHAEL
10700 HWY 301 SOUTH
HAMPTON, FL 32044 US

Name and Address of New Registered Agent:

HANKE, MICHAEL
1509 E. BROWNLEE ST
STARKE, FL 32091 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: MICHAEL L. HANKE

02/23/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HANKE, MICHAEL
Address: 1620 S POPE LICK RD
City-St-Zip: LOUISVILLE, KY 40299

Title: D () Delete
Name: HANKE, DONNA
Address: 1620 S POPE LICK RD
City-St-Zip: LOUISVILLE, KY 40299

Title: O () Delete
Name: HANKE, DONNA
Address: 1620 S POPE LICK RD
City-St-Zip: LOUISVILLE, KY 40299

Title: O () Delete
Name: HANKE, MICHAEL
Address: 1620 S POPE LICK RD
City-St-Zip: LOUISVILLE, KY 40299

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HANKE, MICHAEL
Address: 4610 HOPEWELL RD
City-St-Zip: LOUISVILLE, KY 40299

Title: D (X) Change () Addition
Name: HANKE, DONNA
Address: 4610 HOPEWELL RD
City-St-Zip: LOUISVILLE, KY 40299

Title: O (X) Change () Addition
Name: HANKE, DONNA
Address: 4610 HOPEWELL RD
City-St-Zip: LOUISVILLE, KY 40299

Title: O (X) Change () Addition
Name: HANKE, MICHAEL
Address: 4610 HOPEWELL RD
City-St-Zip: LOUISVILLE, KY 40299

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: MICHAEL L HANKE

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02/23/2006

Electronic Signature of Signing Officer or Director

Date