

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 18, 2006 8:00 am**  
**Secretary of State**

04-24-2006 90409 007 \*\*\*150.00

<b>DOCUMENT # P02000072406</b>					
<b>1. Entity Name</b> THE TOUR & PLAYERS SCHOOL, INC.					
<b>Principal Place of Business</b> 308 SAND PINE PLACE GENEVA, FL 32732			<b>Mailing Address</b> PO BOX 1290 GENEVA, FL 32732		
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
<b>6. Name and Address of Current Registered Agent</b>  REDD, JOHN 308 SAND PINE PLACE GENEVA, FL 32732			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
<b>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.</b>					
<b>SIGNATURE</b> _____ (NOTE: Registered Agent signature required when reappointing) _____ <b>DATE</b> _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> <b>ADD</b> REDD, JOHN 308 SAND PINE PLACE GENEVA, FL 32732		<input type="checkbox"/> <b>DELETE</b>	<input checked="" type="checkbox"/> <b>ADD</b> REDD, MARY C. 308 SAND PINE PLACE GENEVA, FL 32732	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> <b>ADD</b> KIM, HWAN 308 SAND PINE PLACE GENEVA, FL 32732		<input type="checkbox"/> <b>DELETE</b>	<input checked="" type="checkbox"/> <b>ADD</b> REDD, MARY C. 308 SAND PINE PL GENEVA, FL 32732	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> <b>ADD</b> SMITH, EDWARD 308 SAND PINE PLACE GENEVA, FL 32732		<input type="checkbox"/> <b>DELETE</b>	<input type="checkbox"/> <b>CHANGE</b> <input type="checkbox"/> <b>ADDITION</b>	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> <b>DELETE</b>		<input type="checkbox"/> <b>CHANGE</b> <input type="checkbox"/> <b>ADDITION</b>		
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> <b>DELETE</b>		<input type="checkbox"/> <b>CHANGE</b> <input type="checkbox"/> <b>ADDITION</b>		
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> <b>DELETE</b>		<input type="checkbox"/> <b>CHANGE</b> <input type="checkbox"/> <b>ADDITION</b>		
<b>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.</b>					
<b>SIGNATURE</b> _____		4/22/06 407-349-004 _____ Date Daytime Phone #			