

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000092689

Entity Name: GOODY GOOD DEEDS, INC.

FILED  
Feb 09, 2006  
Secretary of State

## Current Principal Place of Business:

1100 WHITE STREET  
KEY WEST, FL 33040

## New Principal Place of Business:

1207 FLORIDA ST.  
#1  
KEY WEST, FL 33040

## Current Mailing Address:

1100 WHITE STREET  
KEY WEST, FL 33040

## New Mailing Address:

1207 FLORIDA ST.  
#1  
KEY WEST, FL 33040

FEI Number: 73-1656424

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GROB, BARBARA  
1100 WHITE ST  
KEY WEST, FL 33040 US

## Name and Address of New Registered Agent:

GROB, BARBARA  
1207 FLORIDA ST  
#1  
KEY WEST, FL 33040 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: BARBARA GROB

02/09/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PST ( ) Delete  
Name: GROB, BARBARA  
Address: 1100 WHITE STREET  
City-St-Zip: KEY WEST, FL 33040

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition  
Name: GROB, BARBARA  
Address: 1207 FLORIDA ST., #1  
City-St-Zip: KEY WEST, FL 33040

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: BARBARA GROB

P

02/09/2006

Electronic Signature of Signing Officer or Director

Date