2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000112533

FILED Apr 15, 2006 Secretary of State

Entity Name: TEAK EXPERIENCE, CO. **Current Principal Place of Business: New Principal Place of Business:** 27200 RIVERVIEW CENTER BLVD 103 BONITA SRINGS, FL 34134 **New Mailing Address: Current Mailing Address:** 27200 RIVERVIEW CENTER BLVD BONITA SRINGS, FL 34134 FEI Number: 14-1853433 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCHUMANN, RAYMOND L 27200 RIVERVIEW CENTER BLVD BONITA SRINGS, FL 34134 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition THOMAS, SUZANNE H THOMAS, SUZANNE H Name: Name: 261 MONARCH DRIVE 12259 TOSCANA WAY #101 Address: Address: City-St-Zip: STREAMWOOD, IL 60107 City-St-Zip: BONITA SPRINGS, FL 34135 Title: Title: () Delete (X) Change () Addition Name: THOMAS, RICHARDS C Name: THOMAS, RICHARDS C Address:

261 MONARCH DRIVE 12259 TOSCANA WAY #101 Address: STREAMWOOD, IL 60107 BONITA SPRINGS, FL 34135 City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition

THOMAS, MARIE H THOMAS, MARIE H Name: Name: 261 MONARCH DRIVE 12259 TOSCANA WAY #101 Address: Address: City-St-Zip: STREAMWOOD, IL 60107 City-St-Zip: BONITA SPRINGS, FL 34135

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: SUZANNE H THOMAS DP 04/15/2006