2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006
Secretary of State

DOCUMENT# P02000124944

Entity Name: RED BEARDS COLLECTIBLES, INC.

Current Principal Place of Business:

162 SAINT GEORGE STREET
SUITE 28
ST. AUGUSTINE, FL 32084

New Principal Place of Business:

2121 US1 S
UNIT 22
ST. AUGUSTINE, FL 32086

Current Mailing Address:

313 EIZA LANE
ST. AUGUSTINE, FL 32084

New Mailing Address:

2121 US1 S UNIT 22
ST. AUGUSTINE, FL 32086

FEI Number: 05-0541515 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KRESGE, KENNETH R
1200 PLANTATION ISLAND DRIVE
SUITE 230
ST. AUGUSTINE, FL 32080 US

Name and Address of New Registered Agent:

WILLIAMS, ROBERT R PRES.
2121 US1 S
UNIT 22
ST. AUGUSTINE, FL 32086 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: ROBERT WILLIAMS 04/17/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: WILLIAMS, ROBERT R
Address: 313 AIZA LANE
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: VP ( ) Delete
Name: WILLIAMS, VICTOR R
Address: 205 CHICHI PLACE
City-St-Zip: ST. AUGUSTINE, FL 32086

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: WILLIAMS, ROBERT R
Address: 2121 US1 S UNIT 22
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: VP (X) Change ( ) Addition
Name: WILLIAMS, VICTOR R
Address: 2121 US1 S UNIT 22
City-St-Zip: ST. AUGUSTINE, FL 32086

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: ROBERT WILLIAMS PRES 04/17/2006
Electronic Signature of Signing Officer or Director Date