

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000011145

Entity Name: ETCETERA, ETC. INC.

FILED
Jan 18, 2006
Secretary of State

Current Principal Place of Business:

3125 SE MORNINGSID BLVD
PORT ST LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

3125 SE MORNINGSID BLVD
PORT ST LUCIE, FL 34952

New Mailing Address:

FEI Number: 04-3745880

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FALK, ALLEN
420 N DIXIE HWY
LAKE WORTH, FL 33460 US

Name and Address of New Registered Agent:

CHRIS, FOGAL
1115 DELAWARE AVENUE
FORT PIERCE, FL 34950 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: CHRIS FOGAL

01/18/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: SCHWARTZ, EILEEN S
Address: 3125 SE MORNINGSID BLVD.
City-St-Zip: PT. ST. LUCIE, FL 34952

Title: VP () Delete
Name: ZILEWICZ, EDWARD P
Address: 3125 SE MORNINGSID BLVD.
City-St-Zip: PT. ST. LUCIE, FL 34952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: EDWARD P. ZILEWICZ

VP

01/18/2006

Electronic Signature of Signing Officer or Director

Date