2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2006
Secretary of State

DOCUMENT# P03000047299

Entity Name: SKI BUNNIES, INC.

Current Principal Place of Business:

5100 7TH AVENUE NORTH
ST. PETERSBURG, FL 33710

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 66596
ST. PETE BEACH, FL 33736

New Mailing Address:

FEI Number: 86-1069850 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ZAPPALA, JOANNE
5100 7TH AVENUE NORTH
ST. PETERSBURG, FL 33710 US

Name and Address of New Registered Agent:

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:

Title:	P.	( ) Delete
Name:	ZAPPALA, JOANNE	
Address:	6235 VISTA VERDE DRIVE WEST	
City-St-Zip:	GULFPORT, FL 33707	
Title:	VP	( ) Delete
Name:	JOHNSON, VALERIE C	
Address:	6235 VISTA VERDE DRIVE WEST	
City-St-Zip:	GULFPORT, FD 33707	
Title:	SEC	( ) Delete
Name:	SPOHN, KIMBERLY A	
Address:	6235 VISTA VERDE DRIVE WEST	
City-St-Zip:	GULFPORT, FL 33707	
Title:	T	( ) Delete
Name:	KANNE, ANDREA	
Address:	6235 VISTA VERDE DRIVE WEST	
City-St-Zip:	GULFPORT, FL 33707	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: JOANNE ZAPPALA P 03/27/2006

Electronic Signature of Signing Officer or Director — Date