

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000080643

FILED
Mar 13, 2006
Secretary of State

Entity Name: A PLAY PATCH INC.

Current Principal Place of Business:

13988 WEST HILLSBOROUGH AVE.
TAMPA, FL 33635

New Principal Place of Business:

Current Mailing Address:

13988 WEST HILLSBOROUGH AVE.
TAMPA, FL 33635

New Mailing Address:

FEI Number: 86-1074132 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCRACKEN, ANITA M
6999 301 AVE N
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

MCCRACKEN, ANITA M
19754 TIMBERBLUFF DRIVE
LAND O' LAKES, FL 34638 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: ANITA M. MCCRACKEN 03/13/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCCRACKEN, ANITA M
Address: 6999 301 AVE N
City-St-Zip: CLEARWATER, FL 33761

Title: VP () Delete
Name: MCCRACKEN, ROBERT A
Address: 6999 301 AVE N
City-St-Zip: CLEARWATER, FL 33761

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCCRACKEN, ANITA M
Address: 19754 TIMBERBLUFF DRIVE
City-St-Zip: LAND O' LAKES, FL 34638

Title: VP (X) Change () Addition
Name: VAN LANDINGHAM, MONICA S
Address: 7516 TURTLE BROOK LANE
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: SEC () Change (X) Addition
Name: MCCRACKEN, ROBERT A
Address: 19754 TIMBERBLUFF DRIVE
City-St-Zip: LAND O' LAKES, FL 34638

Title: TRES () Change (X) Addition
Name: VAN LANDINGHAM, KENETH T JR
Address: 7516 TURTLE BROOK LANE
City-St-Zip: NEW PORT RICHEY, FL 34655

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: ANITA M. MCCRACKEN PRES 03/13/2006

Electronic Signature of Signing Officer or Director Date