2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000126685

City-St-Zip:

COCOA BEACH, FL 32931

FILED Jan 24, 2006 Secretary of State

Entity Nan	ne: THE FIS	SHERMEN'S MARKET, INC.				
Current Principal Place of Business:				New Principal Place of Business:		
714 SCALL CAPE CAN	OP DR AVERAL, F	L 32920		714 BLUEWATER DR CAPE CANAVERAL, FL 32920		
Current Mailing Address:				New Mailing Address:		
P.O. BOX 3 CAPE CAN	04 AVERAL, F	L 32920				
FEI Number:	20-0369800	FEI Number Applied For()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
SOLANO, RHODA 500 W COCOA BEACH CAUSEWAY COCOA BEACH, FL 32931 US				MILLIKEN, LLOYD R 145 WEST PASCO LN COCOA BEACH, FL 32931 US		
The above in the State		y submits this statement for the p	ourpose of changing	its registered o	ffice or registered agent, or both,	
SIGNATURE: LLOYD R. MILLIKEN				01/24/2006		
	Electro	onic Signature of Registered Age	ent		Date	
Election Cam	paign Financi	ing Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	SOLANO, RH 500 W COCC	() Delete IODA DA BEACH CAUSEWAY CH, FL 32931	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	MILLIKEN, LI 500 W COCC	() Delete LOYD DA BEACH CSWY CH, FL 32931	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address:	MILLIKEN, TI	() Delete MOTHY DA BEACH CSWY	Title: Name: Address:	V (X) MILLIKEN, TIMO 145 WEST PAS		

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.

City-St-Zip: COCOA BEACH, FL 32931

SIGNATURE: TIMOTHY LLOYD MILLIKEN VP 01/24/2006