

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000158504

Entity Name: BIG APPLE HOLDINGS, INC.

FILED
Apr 24, 2006
Secretary of State

Current Principal Place of Business:

280 WEKIVA SPRINGS RD
STE 201
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

280 WEKIVA SPRING, RD, SUITE 205
LONGWOOD, FL 32779

New Mailing Address:

280 WEKIVA SPRING, RD, SUITE 201
LONGWOOD, FL 32779

FEI Number: 36-4548374

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEFF, JOHN P
175 CROWN POINT CIR
LONGWOOD, FL 32779 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: D () Delete
Name: PETERSEIM, WILLIAM
Address: 280 WEKIVA SPRING, RD, SUITE 205
City-St-Zip: LONGWOOD, FL 32779

Title: SD (X) Delete
Name: KIMBALL, PEGGY
Address: 2853 CHARMONT DRIVE
City-St-Zip: APOKA, FL 32703

Title: D () Delete
Name: NEFF, JOHN
Address: 175 CROWN POINT CIR.
City-St-Zip: LONGWOOD, FL 32779

Title: D () Delete
Name: WILSON, JAMES
Address: 4765 ESTERS BLVD.
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: P () Delete
Name: MAGUIRE, GREG
Address: 991 FEATHER DRIVE
City-St-Zip: DELTONA, FL 32725

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PETERSEIM, WILLIAM
Address: 280 WEKIVA SPRING, RD, SUITE 201
City-St-Zip: LONGWOOD, FL 32779

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: GREG MAGUIRE

PRES

04/24/2006

Electronic Signature of Signing Officer or Director

Date