*2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 28, 2006 08:00 AN Secretary of State **DOCUMENT # P04000095137** 1. Entity Name GLENYS OLDHAM, INC. Mailing Address Principal Place of Business 801 GOLDEN POND COURT 801 GOLDEN POND COURT OSPREY, FL 34229 OSPREY, FL 34229 US CR2E034 (11/05) 02122006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1272695 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE DOLANSKY, JOHN 1216 RIDGEWOOD AVENUE VENICE, FL 34285 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typad or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. П Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. RITLE PSTD OLDHAM, GLENYS NAME 801 GOLDEN POND COURT STREET ADDRESS CITY-ST-ZIP OSPREY, FL 34229 DILE NAME 05/10/06-80076-015 150.00 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE City-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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SLEWYS OLDHAM

4/00/06

941-966-1240

FILED