2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000113520

Entity Name: AVALON BEACH INC.

FILED Oct 05, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3520 AVALON PARK EAST BOULEVARD ORLANDO, FL 32828

Current Mailing Address: New Mailing Address:

3520 AVALON PARK EAST BOULEVARD ORLANDO, FL 32828

FEI Number: 34-2008145 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KINNEY, ABBIE

13185 LIBERTY SQUARE DRIVE
ORLANDO, FL 32828 US

KINNEY, THEODORE C
1039 WILLOW BRANCH DRIVE
ORLANDO, FL 32828 US
ORLANDO, FL 32828 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: THEODORE KINNEY 10/05/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 KINNEY, THEODORE
 Name:
 KINNEY, THEODORE C

 Address:
 13185 LIBERTY SQUARE DRIVE
 Address:
 1039 WILLOW BRANCH DRIVE

City-St-Zip: ORLANDO, FL 32828 City-St-Zip: ORLANDO, FL 32828

Title: VPD () Delete Title: VPD (X) Change () Addition Name: KINNEY, ABBIE Name: SCHOENLEIN, ERIC DR

Address: 13185 LIBERTY SQUARE DRIVE Address: 1612 GENESSEE STREET City-St-Zip: ORLANDO, FL 32828 City-St-Zip: UTICA, NY 13502

Title: SD (X) Delete Title: () Change () Addition

 Name:
 SCHOENLEIN, ERIC DR
 Name:

 Address:
 1612 GENESSEE STREET
 Address:

 City-St-Zip:
 UTICA, NY 13502
 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: THEODORE KINNEY PD 10/05/2006