


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Aug 07, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P04000114497</b> 1. Entity Name <b>FLORIDA REVEALED INC.</b>	
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Principal Place of Business <b>P.O. BOX 6866 AVON PARK, FL 33825</b>	Mailing Address <b>P.O. BOX 6866 AVON PARK, FL 33825</b>
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**DO NOT WRITE IN THIS SPACE**



07222006 No Chg-P CR2E034 (11/05)

4. FEI Number <b>51-0521002</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent

**GILBERT, TINA  
5843 VAN SIMMONS RD  
WAUCHULA, FL 33873**

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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 Tina Gilbert VICE PRESIDENT DATE 7/22/06

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GILBERT, TINA 5843 VAN SIMMONS RD WAUCHULA, FL 33873
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SCHENCK, BRENT P.O. BOX 6866 AVON PARK, FL 33825
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08/07/06-80005-003 150.00

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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: Tina Gilbert DATE 7/22/06 DAYTIME PHONE # 863-832-0242

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR