## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000120303

MANGO, FL 33550

City-St-Zip:

Entity Name: HANDMADE IN FLORIDA CRAFT GALLERIES, INC.

FILED Apr 21, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** P. O. BOX 1726 1903 NORTH 19TH STREET MANGO, FL 33550 TAMPA, FL 33605 **Current Mailing Address: New Mailing Address:** P. O. BOX 1726 MANGO, FL 33550 FEI Number: 20-1526085 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WINTERS, ELISE K WINTERS, ELISE K 133 N. FT. HARRISON AVE 1006 DREW STREET CLEARWATER, FL 33755 US CLEARWATER, FL 33755 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: 04/21/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition BURGE, GARY L Name: Name: P.O. BOX 1726 Address: Address: City-St-Zip: MANGO, FL 33550 City-St-Zip: ( ) Delete Title: TS Title: () Change () Addition JETSON, JUDI Name: Name: P.O. BOX 1726 Address: 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: GARY L BURGE P 04/21/2006