2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Dec 05, 2006
Secretary of State

DOCUMENT# P04000168319

Entity Name: CS&A NEW VENTURE, INC.

Current Principal Place of Business:

7490 GRISSOM PARKWAY
PORT ST. JOHN, FL 32927

New Principal Place of Business:

Current Mailing Address:

7490 GRISSOM PARKWAY
PORT ST. JOHN, FL 32927

New Mailing Address:

FEI Number: 34-2028959 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FALLOWS, CHERYL L
7490 GRISSOM PARKWAY
PORT ST. JOHN, FL 32927 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

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: FALLOWS, CHERYL L
Address: 7490 GRISSOM PARKWAY
City-St-Zip: PORT ST. JOHN, FL 32927

Title: S (X) Delete
Name: WILSON, BLAIR E
Address: 203 HARRISON AVE
City-St-Zip: MILFORD, CT 06460

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CHERYL L. FALLOWS PRES 12/05/2006

Electronic Signature of Signing Officer or Director — Date