2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000013300

Entity Name: NEUENDORF ENTERPRISES, INC.

FILED Apr 28, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

4809 MYRTLE OAK DR #13 6031 REDWOOD DR

NEW PORT RICHEY, FL 34653 NEW PORT RICHEY, FL 34653

Current Mailing Address: New Mailing Address:

4809 MYRTLE OAK DR #13 P O BOX 3434 NEW PORT RICHEY, FL 34653 HOLIDAY, FL 34692

FEI Number: 27-0061991 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:

NEUENDORF, DIANNE 4809 MYRTLE OAK DR #13 NEUENDORF, DIANNE 6031 REDWOOD DR

NEW PORT RICHEY, FL 34653 US NEW PORT RICHEY, FL 34653 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: DIANNE NEUENDORF 04/28/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

Name: NEUENDORF, DIANNE
Address: 4809 MYRTLE OAK DR #13
Name: NEUENDORF, DIANNE
Address: 6031 REDWOOD DR

City-St-Zip: NEW PORT RICHEY, FL 34653 City-St-Zip: NEW PORT RICHEY, FL 34653

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change () Addition}$

Name: NEUENDORF, JAMES C Name: NEUENDORF, JAMES C Address: 4809 MYRTLE OAK DR #13 Address: 6031 REDWOOD DR

City-St-Zip: NEW PORT RICHEY, FL 34653 City-St-Zip: NEW PORT RICHEY, FL 34653

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: DIANNE NEUENDORF P 04/28/2006