## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000019809

Entity Name: E.N.T. ADVENTURES, INC

FILED Apr 06, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
259 BAYV DESTIN, F	VINDS DRIVE FL 32541 US				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
259 BAYW DESTIN, F	VINDS DRIVE FL 32541 US				
FEI Number	: 20-2384992	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:					
4475 LEG DESTIN, F	VS, DANA C ENDARY DRIVE FL 32541 US				
	e named entity su e of Florida.	ıbmits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
	Electronic	Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P/T () [ RAY, SHELIA P 259 BAYWINDS DESTIN, FL 325		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: Citv-St-Zip:	VP/S () [ KNOWLES, JOAI 259 BAYWINDS DESTIN, FL 325	DRIVE	Title: Name: Address: Citv-St-Zip:	( ) Change ( ) Addition	

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: JO ANN KNOWLES VP/S 04/06/2006