2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2006
Secretary of State

DOCUMENT# P05000084910

Entity Name: SOGGY DOLLARS OF AMELIA ISLAND, INC.

Current Principal Place of Business:

95269 MACKINAS CIR.
AMELIA ISLAND, FL 32034

New Principal Place of Business:

464006 S.R. 200
YULEE, FL 32097

Current Mailing Address:

95269 MACKINAS CIR.
AMELIA ISLAND, FL 32034

New Mailing Address:

FEI Number: 16-1726711 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ADAMS, PATRICIA S
95269 MACKINAS CIR.
AMELIA ISLAND, FL 32034 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Change (X) Addition
Name: ADAMS, PATRICIA S MS
Address: 95269 MACKINAS CIRCLE
City-St-Zip: AMELIA ISLAND, FL 32034 US

Title: V ( ) Change (X) Addition
Name: ADAMS, SCOTT V MR
Address: 95269 MACKINAS CIRCLE
City-St-Zip: AMELIA ISLAND, FL 32034 US

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: PATRICIA S. ADAMS P 01/06/2006

Electronic Signature of Signing Officer or Director — Date