2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000093322

Entity Name: SCHAN, INC.

FILED Apr 25, 2006 Secretary of State

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

4051 GULFSHORE BLVD APT 902 557 NORTH WYMORE ROAD NAPLES, FL 34103

SUITE 100

MAITLAND, FL 32751

Current Mailing Address: New Mailing Address:

4051 GULFSHORE BLVD APT 902 557 NORTH WYMORE ROAD NAPLES, FL 34103

SUITE 100

MAITLAND, FL 32751

FEI Number: 20-3094702 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

KOLTUN, JEFFREY M KOLTUN, JEFFREY M 557 NORTH WYMORE ROAD 557 N WYMORE RD SUITE 100 MAITLAND, FL 32751 SUITE 100

MAITLAND, FL 32751 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: JEFFREY M. KOLTUN 04/25/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete

Name: LANSING, NEIL

4051 GULF SHORE BLVD APT 902 Address:

City-St-Zip: NAPLES, FL 34103

Title: () Delete Name: LANSING, ANNELIESE C

4051 GULF SHORE BLVD APT 902 Address:

NAPLES, FL 34103 City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition

LANSING, NEIL Name:

557 NORTH WYMORE ROAD, SUITE 100 Address:

City-St-Zip: MAITLAND, FL 32751

Title: (X) Change () Addition

Name: LANSING, ANNELIESE C

Address: 557 NORTH WYMORE ROAD, SUITE 100

MAITLAND, FL 32751 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: NEIL LANSING PTD 04/25/2006