

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006 8:00 am
Secretary of State

04-27-2006 90155 028 ***150.00

DOCUMENT # P05000122494 1. Entity Name GRAND ENTRANCE UNLIMITED, INC			
Principal Place of Business 104B CORAL REEF COURT NORTH PALM COAST, FL 32137		Mailing Address 104B CORAL REEF COURT NORTH PALM COAST, FL 32137	
2. Principal Place of Business 75 Pony Express <small>Suite, Apt. #, etc.</small>		3. Mailing Address 75 Pony Express <small>Suite, Apt. #, etc.</small>	
City & State Palm Coast		City & State Palm Coast	
Zip 32164		Zip 32164	
Country Flagler		Country Flagler	
4. FEI Number 20-3454120		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BORCHARDT, KIM J. 104B CORAL REEF COURT NORTH PALM COAST, FL 32137		7. Name and Address of New Registered Agent Name Borchardt, Kim J. Street Address (P.O. Box Number is Not Acceptable) 75 Pony Express City Palm Coast FL 32164	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Kim J. Borchardt KIM J. BORCHARDT April 22, 2006 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BORCHARDT, KIM J. 104B CORAL REEF COURT NORTH PALM COAST, FL 32137	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete 75 Pony Express Palm Coast FL 32164
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV BORCHARDT, JOANN F. 104B CORAL REEF COURT NORTH PALM COAST, FL 32137	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT BORCHARDT, KLAUS I. 104B CORAL REEF COURT NORTH PALM COAST, FL 32137	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS WAHL, RONALD J. 104B CORAL REEF COURT NORTH PALM COAST, FL 32137	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: Kim J. Borchardt <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		April 22, 2006 <small>Date Daytime Phone #</small>	

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