2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11852

Entity Name: PENN-SOTA, INC.

FILED Apr 28, 2006 Secretary of State

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

165 FAIRFIELD AVE JOHNSTOWN, PA 159062333 165 FAIRFIELD AVE JOHNSTOWN, FL 15901

Current Mailing Address: New Mailing Address:

165 FAIRFIELD AVE JOHNSTOWN, PA 159062333 165 FAIRFIELD AVE JOHNSTOWN, FL 15901

FEI Number: 25-1876611 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:

MACY, WILLIAM
2320 BEE RIDGE RD LOT146A
SARASOTA, FL 34239 US

KURVIN, STEPHEN H ESQ.
7 SOUTH LIME AVENUE
SARASOTA, FL 34237 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: WILLAIM MACY 04/28/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD () Delete Title: DP (X) Change () Addition Name: MACY, WILLIAM Name: SHILEY, STANLEY

Address: 2320 BEE RIDGE RD LOT 146A Address: 165 FAIRFIELD AVE
City-St-Zip: SARASOTA, FL 34239 City-St-Zip: JOHNSTOWN, FL 15901

Title: STD () Delete Title: DV (X) Change () Addition Name: SHILEY, STANLEY Name: GRAHAM, MICHELLE R

 Name:
 SHILEY, STANLEY
 Name:
 GRAHAM, MICHELLE R

 Address:
 165 FAIRFIELD AVE
 Address:
 305 FRANKLIN ST

 City-St-Zip:
 JOHNSTOWN, PA
 City-St-Zip:
 JOHNSTOWN, PA 15901

Title: DV () Delete Title: DST (X) Change () Addition Name: MICHELLE, GRAHAM R Name: SZEWCZYK, LINDA J

Address: 305 FRANKLIN ST Address: 305 FRANKLIN ST
City-St-Zip: JOHNSTOWN, PA 15901 City-St-Zip: JOHNSTOWN, PA 15901

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

 Name:
 LINDA, SZEWCZYK
 Name:

 Address:
 305 FRANKLIN ST
 Address:

 City-St-Zip:
 JOHNSTOWN, PA 15901
 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: STANLEY SHILEY P 04/28/2006