

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P94000044426

Entity Name: BAD DUCKS, INCORPORATED

FILED
Aug 21, 2006
Secretary of State

Current Principal Place of Business:

306 STELLA MARIO DR S
NAPLES, FL 34114 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7241
NAPLES, FL 34101 US

New Mailing Address:

FEI Number: 65-0502788

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIPKO, ROGER S
306 STELLA MARIO DR S
NAPLES, FL 34114 US

Name and Address of New Registered Agent:

LIPKO, SHIRLEY M
306 STELLA MARIS DR S
NAPLES, FL 34114 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: SHIRLEY M LIPKO

08/21/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPV () Delete
Name: LIPKO, ROGER S
Address: 306 STELLA MARIO DR S
City-St-Zip: NAPLES, FL 34114

Title: DST (X) Delete
Name: LIPKO, SHIRLEY M
Address: 306 STELLA MARIO DR S
City-St-Zip: NAPLES, FL 34114

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPVS (X) Change () Addition
Name: LIPKO, SHIRLEY M
Address: 306 STELLA MARIS DR S
City-St-Zip: NAPLES, FL 34114

Title: () Change () Addition
Name:
Address:
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: SHIRLEY M LIPKO

P

08/21/2006

Electronic Signature of Signing Officer or Director

Date