2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000030061

Entity Name: SOUTHERN EXPOSURE ADVENTURE, INC.

FILED Feb 25, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
	RFSIDE BLVD. RAL, FL 33914	US			
Current M	lailing Addres	s:	New Mailing Address	:	
	RFSIDE BLVD. RAL, FL 33914	US			
FEI Number	: 65-0623017	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and Address of	New Registered Agent:	
3833 SUR	, CAROLYN RFSIDE BLVD RAL, FL 33914	US			
	e named entity s e of Florida.	submits this statement for the p	purpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Age			ent	Date	
Election Ca	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () LAMBING, CAR 3833 SURFSIDI CAPE CORAL,	E BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () KERSEY, RAND 6391 BRIGHT R N FT MYERS, F	D.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: Citv-St-Zip:	S/T () LANG, MICHAE 621 CRAIG STF N FT MYERS. F	REET	Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: CAROLYN LAMBING P 02/25/2006