FILED 2006 FOR PROFIT CORPORATION Apr 14, 2006 08:00 AM Secretary of State ANNUAL REPORT DOCUMENT # P95000031899 "C" VENTURE CHARTER COMPANY Principal Place of Business Mailing Address **162 ANCHOR DRIVE** 162 ANCHOR DRIVE VERO BEACH, FL 32963 VERO BEACH, FL 32963 04052006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0574144 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FENNELL, TODD W DO NOT WRITE 979 BEACHLAND BLVD. VERO BEACH, FL 32963 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable. (NOTE flegistered Agent signature required when rematating) DATE FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS MILE NAME CALDARONE, ANTHONY J 162 ANCHOR DRIVE STREET ADDRESS U00000508032 04/27/06-80089-804 158.75 VERO BEACH, FL 32963 CITY-ST-DP SVPS 77111 CALDARONE, JOYCE P NAME STREET ADDRESS 162 ANCHOR DRIVE CITY-ST-AP VERO BEACH, FL 32963 HILE MAGEE, MARY NAME STREET ADDRESS 162 ANCHOR DRIVE DO NOT WRITE VERO BEACH, FL 32963 CITY-ST-702 IN THIS SPACE MLE NAME STREET ADDRESS City-St-ZIP TITLE SIREE! ADDRESS CITY-ST-ZIP THILE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes 1 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 507, 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.

SIGNING OFFICER OR DIRECTOR

Assistant Secretary April 4,

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CITY-ST-ZIP

SIGNATURE: