

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000054571

FILED  
Apr 25, 2006  
Secretary of State

Entity Name: OUTLAW ADVENTURE TOURS, INC.

## Current Principal Place of Business:

801 SEABREEZE BLVD  
STE A125  
FT LAUDERDALE, FL 33316 US

## New Principal Place of Business:

## Current Mailing Address:

6410 CROSSBOW CT  
DAVIE, FL 33331 US

## New Mailing Address:

FEI Number: 65-0592365      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KILBORN, SHARON H  
6410 CROSSBOW COURT  
DAVIE, FL 33331 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LUGINBUHL, DEAN A  
Address: 6410 CROSSBOW CT.  
City-St-Zip: FORT LAUDERDALE, FL 33331

Title: STD ( ) Delete  
Name: LUGINBUHL, WAYNE E  
Address: 1005 SEA BREEZE BLVD  
City-St-Zip: FT LAUDERDALE, FL

Title: V ( ) Delete  
Name: WALLACE, RON  
Address: 10375 NW 31 ST.  
City-St-Zip: CORAL SPRINGS, FL 33065

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: WAYNE E. LUGINBUHL

STD

04/25/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date