2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2006
Secretary of State

DOCUMENT# P95000075665

Entity Name: HOCUS POCUS MANAGEMENT, INC.

Current Principal Place of Business:

745 ORIENTA AVE., #1121
ALTAMONTE SPRINGS, FL 32701 US

New Principal Place of Business:

745 ORIENTA AVENUE
SUITE 1121
ALTAMONTE SPRINGS, FL 32701 US

Current Mailing Address:

745 ORIENTA AVE., #1121
ALTAMONTE SPRINGS, FL 32701 US

New Mailing Address:

745 ORIENTA AVENUE
SUITE 1121
ALTAMONTE SPRINGS, FL 32701 US

FEI Number: 59-3340163 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STOEHR, CATHERINE J
1044 BEARDED OAKS TERRACE
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

STOEHR, R. NORMAN
745 ORIENTA AVENUE
SUITE 1121
ALTAMONTE SPRINGS, FL 32701 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: R. NORMAN STOEHR 04/25/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: STOEHR, CATHERINE J
Address: 745 ORIENTA AVE., #1121
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D ( ) Delete
Name: BLACK, STEPHANIE B
Address: 745 ORIENTA AVE., #1121
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: STOEHR, R. NORMAN
Address: 745 ORIENTA AVE., #1121
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D (X) Change ( ) Addition
Name: BLACK, JAMES B
Address: 745 ORIENTA AVE., #1121
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: R. NORMAN STOEHR PRES 04/25/2006
Electronic Signature of Signing Officer or Director Date