


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 09, 2006 08:00 A
Secretary of State**

DOCUMENT # P96000037298 1. Entity Name REGAL OF THE SOUTH, INC.	
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Principal Place of Business 6451 PARSON BROWN DRIVE ORLANDO, FL 32819	Mailing Address 6451 PARSON BROWN DRIVE ORLANDO, FL 32819
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01042006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3383111	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent TERICK, ALEX JR. 6451 PARSON BROWN DRIVE ORLANDO, FL 32819

**DO NOT WRITE
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000379482 01/10/06-80022-022 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TERICK, ALEX JR. 6451 PARSON BROWN DRIVE ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV TERICK, REGINA 6461 PARSON BROWN DRIVE ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TERICK, PATRICK 2010 CARTER AVE AUGUSTA, KS 67010
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RANKIN, DIANA 34 CIRCLE TRACE FRANKLIN, NC 28734
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YAROS, REGINA 13124 SMART RD LEES SUMMIT, MO 64086
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Alex Terick Jr. ALEX TERICK JR. 1-6-06 407-351-6890
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #