2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000082889

Name: Address:

City-St-Zip:

11313 STATE ROAD 52

HUDSON, FL 34669

Entity Name: POLY VINYL CREATIONS, INC.

FILED Jan 18, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 11313 HWY 52 HUDSON, FL 34669 **Current Mailing Address: New Mailing Address:** 11313 HWY 52 HUDSON, FL 34669 FEI Number: 59-3408466 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BACON, DAVID A ESQ 2959 FIRST AVE N ST PETERSBURG, FL 33713 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition BURTON, ROBERT L Name: Name: 5950 PELICAN BAY PLAZA DRIVE #604 Address: Address: City-St-Zip: GULFPORT, FL 33707 City-St-Zip: Title: VSD Title: () Delete () Change () Addition Name: BURTON, ELLEN H Name: 5950 PELICAN BAY PLAZA DRIVE #604 Address: Address: GULFPORT, FL 33707 City-St-Zip: City-St-Zip: Title: Title: (X) Change () Addition () Delete VΡ DANIELS, CRAIG BURTON, JESSICA L Name: Name: 11313 STATE ROAD 52 11313 STATE ROAD 52 Address: Address: City-St-Zip: HUDSON, FL 34669 City-St-Zip: HUDSON, FL 34669 Title: VΡ (X) Delete Title: () Change () Addition BURTON, JESSICA L

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ELLEN H BURTON **VSD** 01/18/2006