

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Feb 08, 2006 08:00 AM
Secretary of State**

DOCUMENT # P97000001257 1. Entity Name SEA & SUN ESCAPES CORPORATION	
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Principal Place of Business 25188 MARION AVE. E. F-308 PUNTA GORDA, FL 33950	Mailing Address 25188 MARION AVE. E. F-308 PUNTA GORDA, FL 33950
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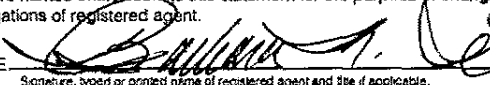
01052006 No Chg-P CR2E034 (11/05)

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4. FEI Number 65-0727025	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent FRY, BARBARA M. 25188 E. MARJAN AVE, F 308 PUNTA GORDA, FL 33950
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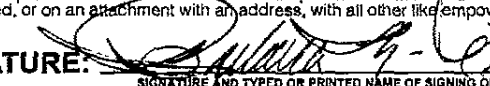
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE  Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$530.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT FRY, BARBARA M 25188 E. MARION, F-308 PUNTA GORDA, FL 33950
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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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 2/5/06 941-575-8247 Date Daytime Phone #
