## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000008503

Entity Name: TERENA CORPORATION

FILED Jan 18, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
11168 WINDSOR PLACE CIR TAMPA, FL 33626 US				14703 CORAL BERRY DR. TAMPA, FL 33626 US		
Current Mailing Address:				New Mailing Address:		
11168 WINDSOR PLACE CIR TAMPA, FL 33626 US				14703 CORAL BERRY DR. TAMPA, FL 33626 US		
FEI Number:	59-3424441	FEI Number Applied For()	FEI Num	nber Not Appli	icable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
GOLDMAN, TERRILL 11168 WINDSOR PL CIR TAMPA, FL 33626 US				GOLDMAN, TERRILL 14703 CORAL BERRY DR. TAMPA, FL 33626 US		
The above in the State		ubmits this statement for the pur	pose of	f changing it	ts registered office or registered agent, or both,	
SIGNATUR	RE: TERRILL	GOLDMAN			01/18/2006	
	Electron	ic Signature of Registered Agent			Date	
Election Can	npaign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD () GOLDMAN, TER 11168 WINDSO TAMPA, FL 336	R PLACE CIR		Title: Name: Address: City-St-Zip:	PD (X) Change ( ) Addition GOLDMAN, TERRILL 14703 CORAL BERRY DR. TAMPA, FL 33626	
Title: Name: Address: City-St-Zip:	D () KANSTOROOM, 10404 DOUBLE TAMPA, FL 336	BAYOU		Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition KANSTOROOM, DAVID 155 45TH AVE. N.E. ST. PETERSBURG, FL 33703	
Title: Name: Address: City-St-Zip:	D () SAWYERS, REI 613 THOMPSON COPPEL, TX 75	N DR		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () WALTERS, JOE 584 CUTTER LN LONG BOAT KE	EL I		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () DA COSTA, MIC 1609 HILLS OF LAS VEGAS, NV	RED #201		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () KALLISH, MICH, 818 S NEWPOR TAMPA, FL 336	RT AVENUE		Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: TERRILL GOLDMAN PD 01/18/2006