2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

STREET ADDRESS CATY -ST-ZIP

SIGNATURE:

Apr 21, 2006 08:00 AM Secretary of State **DOCUMENT # P97000023798** SUWANEE PLAZA PROPERTIES, INC. Principal Place of Business Mailing Address 411 COMMERCIAL COURT 411 COMMERCIAL COURT SUITE E SUITE E VENICE, FL 34292 VENICE, FL 34292 US 02282006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied Far 4. FEI Number 65-0733000 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BINGHAM, JAMES H DO NOT WRITE 411 COMMERCIAL COURT SUITE E IN THIS SPACE **VENICE, FL 34292** 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DA7E 5. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 13 \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE KURLANDER, ROBERT NAME STREET ADDRESS 1230 LAUREL COURT U00000523041 FORT LAUDERDALE, FL. 33326 City-ST-Zip 05/03/06-80057-003 150.00 VSD TITLE BINGHAM, JAMES H NAME 7930 MANASOTA KEY RD STREET ADDRESS CITY-ST-ZIP ENGLEWOOD, FL 34223 MILE OAKLEY, THOMAS E NAME STREET ADDRESS 2974 PLANTATION DRIVE DO NOT WRITE WINTER HAVEN, FL 33883 CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TIME MANAGE STREET ADDRESS CITY-ST-ZIP NAME

12. Therety 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 path; 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 gings like empowered.

NAME OF SIGNING OFFICER OR DIRECTOR

FILED