2006 FOR PROFIT CORPORATION

FILED ANNUAL REPORT May 01, 2006 08:00 Al Secretary of State DOCUMENT # P97000041991 BUNGALOW ANTIQUES & COLLECTIBLES, INC. Principal Place of Business Mailing Address 1910 MANATEE AVENUE, EAST 5604 -41ST AVE E. BRADENTON, FL 34208 BRADENTON, FL 34208 04232006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0753299 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GOODEN, JUDY DO NOT WRITE 1910 MANATEE AVENUE, EAST BRADENTON, FL 34208 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME GOODEN, JUDY STREET ADDRESS 5604 41ST AVENUE, EAST BRADENTON, FL 34208 CITY-ST-ZIE TITLE U000000546739 NAME STREET ADDRESS 05/11/06-80128-018 150.00 CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP DILE 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 legial 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.

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7/P TITLE NAME STREET ADORESS CITY-ST-ZIP

> tooken Judy GOODEN SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dete