2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2006
Secretary of State

DOCUMENT# P97000063123

Entity Name: GALLEY PIZZA, INC.

Current Principal Place of Business:

1600 VIRGINIA ST.
DUNEDIN, FL 34698

New Principal Place of Business:

Current Mailing Address:

1600 VIRGINIA ST.
DUNEDIN, FL 34698

New Mailing Address:

5163 S ROCKY POINT
HOMOSASSA, FL 34448

FEI Number: 59-3460334 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KYLE, JEFFREY A
1275 DALE CIRCLE W.
DUNEDIN, FL 34698 US

Name and Address of New Registered Agent:

KYLE, JEFFREY A
5163 S ROCKY POINT
HOMOSASSA, FL 34448 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: _____ 03/29/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: KYLE, JEFFREY A.
Address: 1275 DALE CIRCLE W.
City-St-Zip: DUNEDIN, FL 34698

Title: S ( ) Delete
Name: KYLE, MARGARET
Address: 1275 DALE CIRCLE W.
City-St-Zip: DUNEDIN, FL 34698

Title: M ( ) Delete
Name: YANTZ, JOHN
Address: 1600 VIRGINIA AVE.
City-St-Zip: DUNEDIN, FL 34698

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: KYLE, JEFFREY A.
Address: 5163 S ROCKY POINT
City-St-Zip: HOMOSASSA, FL 34448

Title: S (X) Change ( ) Addition
Name: KYLE, MARGARET
Address: 5163 S ROCKY POINT
City-St-Zip: HOMOSASSA, FL 34448

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JEFFREY A KYLE PD 03/29/2006
Electronic Signature of Signing Officer or Director — Date