

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000101002

FILED
Jan 12, 2006
Secretary of State

Entity Name: HAPPY TIME ENTERPRISES, INC.

Current Principal Place of Business:

% THE HARRIS BANK, NA
777 S. FLAGLER DR., STE 140
WEST PALM BEACH, FL 33401 US

New Principal Place of Business:

Current Mailing Address:

% THE HARRIS BANK, NA
777 S. FLAGLER DR., STE 140
WEST PALM BEACH, FL 33401 US

New Mailing Address:

FEI Number: 65-0797317 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LITTELL, CHARLES W
% SCRUGGS & CARMICHAEL, PA
4041 NW 37TH PLACE - SUITE B
GAINESVILLE, FL 32606 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: CROWLEY, MARYROSE SISTER
Address: C/O CATHOLIC CHARITIES, INC., PO BOX 8246
City-St-Zip: WEST PALM BEACH, FL 33407

Title: DVPS () Delete
Name: SIDWAY, RODERICK
Address: C/O CATHOLIC CHARITIES, INC., PO BOX 8246
City-St-Zip: WEST PALM BEACH, FL 33407

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: CROWLEY, MARYROSE SISTER
Address: C/O CATHOLIC CHARITIES, INC., PO BOX 8246
City-St-Zip: WEST PALM BEACH, FL 33407 US

Title: DVPS (X) Change () Addition
Name: SIDWAY, ROD K
Address: C/O CATHOLIC CHARITIES, INC., PO BOX 8246
City-St-Zip: WEST PALM BEACH, FL 33407 US

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: SR MARYROSE CROWLEY

DP

01/12/2006

Electronic Signature of Signing Officer or Director

Date