2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000063336

Entity Name: SUSIE'S STRUCTURES, INC.

FILED Feb 16, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

28248 COUNTY RD 561 23820 COUNTY RD 561 ASTATULA, FL 34705 US

Current Mailing Address: New Mailing Address:

P.O. BOX 130

ASTATULA, FL 34705 US

FEI Number: 59-3534296 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HARMON, MOLLY S

28248 COUNTY RD 561

TAVARES, FL 32778 US

DAVID, ZIEGLER A PRES
23820 COUNTY RD 561
ASTATULA, FL 34705 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: DAVID A ZIEGLER 02/16/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 HARMON, MOLLY S
 Name:
 ZIEGLER, DAVID A

 Address:
 28248 COUNTY RD 561
 Address:
 23820 COUNTY RD 561

 City-St-Zip:
 TAVARES, FL 32778
 City-St-Zip:
 ASTATULA, FL 34705

 Name:
 THEISS, MARK
 Name:
 ZIEGLER, VERA

 Address:
 28248 COUNTY RD 561
 Address:
 23820 COUNTY ROAD 561

 City-St-Zip:
 TAVARES, FL 32778
 City-St-Zip:
 ASTATULA, FL 34705

Title: ST () Delete Title: ST (X) Change () Addition

 Name:
 BAKER, SID F
 Name:
 PAREDES, ANN MARIE

 Address:
 28248 COUNTY RD 561
 Address:
 23820 COUNTY ROAD 561

 City-St-Zip:
 TAVARES, FL 32778
 City-St-Zip:
 ASTATULA, FL 34705

Title: () Delete Title: CEO () Change (X) Addition

 Name:
 Name:
 ZIEGLER, WILLIAM A

 Address:
 Address:
 223820 COUNTY ROAD 561

 City-St-Zip:
 City-St-Zip:
 ASTATULA, FL 34705

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: DAVID A ZIEGLER PRES 02/16/2006