## Feb 10, 2006 8:00 am 2006 FOR PROFIT CORPORATION **ANNUAL REPORT Secretary of State** DOCUMENT # S93101 02-10-2006 90011 049 \*\*\*150.00 DECONNA ICE CREAM COMPANY, INC. Principal Place of Business Mailing Address 20006926 6300 CR 318 P.O. BOX 39 ORANGE LAKE, FL 32681 US ORANGE LAKE, FL 32681 US CR2E034 (11/05) 01052006 No Cha-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3095605 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DECONNA, VINCENT DO NOT WRITE 6300 CR 318 ORANGE LAKE, FL 32681 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE DECONNA, VINCENT NAME 12427 SOUTH US HWY 441 STREET ADDRESS CITY-ST-ZIP MICANOPY, FL 32667 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME

## DO NOT WRITE IN THIS SPACE

FILED

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 legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of 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 offer like empowered.

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

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352-591-1530