

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V68444

FILED
Jul 10, 2006
Secretary of State

Entity Name: SURF SIDE CONVENIENCES, INC.

Current Principal Place of Business:

1450 MIRACLES STRIP PKWY
STE 105
FORT WALTON BEACH, FL 32548 US

Current Mailing Address:

1450 MIRACLES STRIP PKWY
STE 105
FORT WALTON BEACH, FL 32548 US

FEI Number: 59-3148038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JOHNSON, BENNETT W. & MICHAEL S.
1450 MIRACLES STRIP PKWY
STE 105
FORT WALTON BEACH, FL 32548 US

New Principal Place of Business:

1450 MIRACLE STRIP PKWY
STE 205
FORT WALTON BEACH, FL 32548 US

New Mailing Address:

1450 MIRACLE STRIP PKWY
STE 205
FORT WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

JOHNSON, BENNETT W.
1450 MIRACLE STRIP PKWY
STE 205
FORT WALTON BEACH, FL 32548 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: BENNETT W. JOHNSON

07/10/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JOHNSON, BENNETT W.,
Address: 1450 MIRACLE STRIP PKWY STE 105
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: D (X) Delete
Name: JOHNSON, MICHAEL S.,
Address: 1450 MIRACLE STRIP PKWY STE 105
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JOHNSON, BENNETT W.,
Address: 1450 MIRACLE STRIP PKWY STE 205
City-St-Zip: FORT WALTON BEACH, FL 32548

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: BENNETT W. JOHNSON

PRES

07/10/2006

Electronic Signature of Signing Officer or Director

Date