

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000000491

FILED
Mar 24, 2006
Secretary of State

Entity Name: EAC CORPORATION OF DELAWARE

Current Principal Place of Business:

3481 SE COURT DRIVE
STUART, FL 34997

New Principal Place of Business:

Current Mailing Address:

3481 SE COURT DRIVE
STUART, FL 34997

New Mailing Address:

FEI Number: 51-0340260

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRARY, LAWRENCE E III
555 COLORADO AVE.
STUART, FL 34995 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: CPST () Delete
Name: BERKHOLTZ, DIANE K
Address: 3481 SE COURT DRIVE
City-St-Zip: STUART, FL 34997

Title: DV () Delete
Name: BERKHOLTZ, CHRISTIAN B
Address: 3701 SOUTH FLAGLER DRIVE, A-203
City-St-Zip: WEST PALM BEACH, FL 33405

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DV (X) Change () Addition
Name: BERKHOLTZ, CHRISTIAN B
Address: 6967 ISLA VISTA BLVD
City-St-Zip: WEST PALM BEACH, FL 33412

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: DIANE K BERKHOLTZ

CPST

03/24/2006

Electronic Signature of Signing Officer or Director

_____ Date