

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705008

FILED
Feb 07, 2006
Secretary of State

Entity Name: ASSOCIATION FOR RETARDED CITIZENS OF FLORIDA, INC.

Current Principal Place of Business:

2898 MAHAN DRIVE
SUITE 1
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

2898 MAHAN DRIVE
SUITE 1
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 59-0830741

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALL, JOHN
2898 MAHAN DRIVE
SUITE 1
TALLAHASSEE, FL 32308 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

OFFICERS AND DIRECTORS:

Title: DPP () Delete
Name: DIRIENZO, JOHN
Address: 7194 HOILDAY DRIVE
City-St-Zip: SPRING HILL, FL 34606

Title: PD () Delete
Name: BOWLING, J
Address: 1861 EDGEWATER DRIVE
City-St-Zip: MT. DORA, FL 32757

Title: D () Delete
Name: HALL, JOHN
Address: 2898 MAHAN DRIVE, SUITE 1
City-St-Zip: TALLAHASSEE, FL 32308

Title: TD () Delete
Name: MILLER, DAVID
Address: 123 TRUXTON AVENUE
City-St-Zip: FT. WALTON BEACH, FL 32547

Title: DS () Delete
Name: SMITH, MAVIS
Address: 1335 SOUTH BOULEVARD
City-St-Zip: CHIPLEY, FL 32428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPP (X) Change () Addition
Name: DIRIENZO, JOHN
Address: 3090 POLK AVENUE
City-St-Zip: SPRING HILL, FL 34609

Title: PD (X) Change () Addition
Name: YOUNG, PATRICIA
Address: 5955 OSPREY PLACE
City-St-Zip: PENSACOLA, FL 32504

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

Title: TD (X) Change () Addition
Name: JOHNSON, DEBBIE
Address: 5310 HAMPTON GABLE COURT WEST
City-St-Zip: JACKSONVILLE, FL 32257

Title: DS (X) Change () Addition
Name: ROODE, LYNDIA
Address: 4465 11TH PLACE SW
City-St-Zip: VERO BEACH, FL 32968

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN C. HALL

D

02/07/2006

Electronic Signature of Signing Officer or Director

Date