

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710506

FILED
Apr 23, 2006
Secretary of State

Entity Name: CHRISTMAS CIVIC ASSOCIATION, INC

Current Principal Place of Business:

23760 E HWY 50
P.O. BOX 473
CHRISTMAS, FL 327097473

New Principal Place of Business:

Current Mailing Address:

23760 E HWY 50
P.O. BOX 473
CHRISTMAS, FL 327097473

New Mailing Address:

FEI Number: 23-7372952

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEAGLES, BOBBY
21302 FT CHRISTMAS ROAD
CHRISTMAS, FL 32709 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: P () Delete
Name: BEAGLES, BOBBY
Address: 21302 FT CHRISTMAS ROAD
City-St-Zip: CHRISTMAS, FL 32709

Title: D () Delete
Name: JACK, JAMES
Address: 3575 ET. CHRISTMAS RD
City-St-Zip: CHRISTMAS, FL 32709

Title: D () Delete
Name: BRAGG, KAY
Address: 238 FT CHRISTMAS RD
City-St-Zip: CHRISTMAS, FL 32709

Title: VP () Delete
Name: HEALY, STEVE
Address: 21241 REINDEER RD
City-St-Zip: CHRISTMAS, FL 32709

Title: S () Delete
Name: HAMILTON, REBECCA
Address: 2726 ABNEY AVENUE
City-St-Zip: ORLANDO,, FL 32833

Title: T () Delete
Name: CARR, DEBORAH J
Address: 1077 JUNIPER DRIVE P O BOX 386
City-St-Zip: CHRISTMAS, FL 32709

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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Address:
City-St-Zip:

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

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

SIGNATURE: DEBORAH J CARR

TREA

04/23/2006

Electronic Signature of Signing Officer or Director

Date