

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009485

FILED
Jul 03, 2006
Secretary of State

Entity Name: AMCA EVERGLADES CHAPTER, INC.

Current Principal Place of Business:

1320 SOUTH DIXIE HIGHWAY
SUITE 450 GABLES ONE TOWER
MIAMI, FL 33146 US

New Principal Place of Business:

Current Mailing Address:

1320 SOUTH DIXIE HIGHWAY
SUITE 450 GABLES ONE TOWER
MIAMI, FL 33146 US

New Mailing Address:

FEI Number: 54-2120673 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WASSON, ROY D
1320 SOUTH DIXIE HIGHWAY
SUITE 450 GABLES ONE TOWER
MIAMI, FL 33146 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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WASSON, ROY D
Address: 1320 SOUTH DIXIE HIGHWAY, SUITE 450
City-St-Zip: MIAMI, FL 33146 US

Title: VP () Delete
Name: COLE, HOWARD
Address: 2625 GRASSRUN
City-St-Zip: LABELLE, FL 33935

Title: T () Delete
Name: PORTER, DAVID
Address: 13250 SW 224TH ST.
City-St-Zip: MIAMI, FL 33170

Title: S () Delete
Name: WEBB, KELLI
Address: 4286 HARBOUR LANE
City-St-Zip: NORTH FORT MYERS, FL 33170

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: STAUFFER, JACK
Address: 4286 HARBOUR LANE
City-St-Zip: NORTH FORT MYERS, FL 33903

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: ROY D. WASSON

P

07/03/2006

Electronic Signature of Signing Officer or Director

_____ Date