

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 12, 2006  
Secretary of State**

DOCUMENT# N94000005610

Entity Name: GOVERNOR'S HURRICANE CONFERENCE, INC.

**Current Principal Place of Business:**

1711 AVOCA DR.  
TARPON SPRINGS, FL 34689 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 279  
TARPON SPRINGS, FL 346880279 US

**New Mailing Address:**

FEI Number: 65-0533961      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DAINES, LYNN  
1711 AVOCA DR.  
TARPON SPRINGS, FL 34689 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: T ( ) Delete  
Name: JOYNER, HAROLD R  
Address: 2555 SHUMMARD OAK BLVD  
City-St-Zip: TALLAHASSEE, FL 323992100

Title: VP ( ) Delete  
Name: RAINEY, EVE  
Address: 2555 SHUMMARD OAK BLVD  
City-St-Zip: TALLAHASSEE, FL 323992100

Title: VP ( ) Delete  
Name: WILSON, JOHN  
Address: PO BOX 398  
City-St-Zip: FT. MYERS, FL 33902

Title: D ( ) Delete  
Name: FITZGERALD, JOHN  
Address: 9165 PARK DRIVE  
City-St-Zip: MIAMI SHORES, FL 33138

Title: P ( ) Delete  
Name: BAKER, MICHELE  
Address: 8744 GOVERNMENT DR  
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: EVP ( ) Delete  
Name: DAINES, LYNN  
Address: 1711 AVOCA DR.  
City-St-Zip: TARPON SPRINGS, FL 34689

**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:

Title: D (X) Change ( ) Addition  
Name: KARL, MERCEDES  
Address: 867 SEDDON COVE WAY  
City-St-Zip: TAMPA, FL 33602

Title: P (X) Change ( ) Addition  
Name: CARPER, SHERMAN  
Address: 201 NW 84TH AVE.  
City-St-Zip: PLANTATION, FL 33324

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: LYNN DAINES

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

EVP

03/12/2006

\_\_\_\_\_  
Date