2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 10, 2006 8:00 am
Secretary of State
07-10-2006 90026 004 ****70.00

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1. Entity Name
ASSOCIATION FOR RETARDED CITIZENS - VOLUSIA, INC.

50021997

Principal Place of Business	Mailing Address
100 JIMMY HUGER CIR. P.O. BOX 9658 DAYTONA BEACH, FL 32117-5108	100 JIMMY HUGER CIR. P.O. BOX 9658 DAYTONA BEACH, FL 32117-5108

07052006 Chg-NP CR2E037 (4/06)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1035137 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ROLL, DANIEL O
100 JIMMY HUGER CIR
DAYTONA BCH, FL 32117

7. Name and Address of New Registered Agent

Name JAMES KING
Street Address (P.O. Box Number is Not Acceptable)
100 Jimmy Huger Circle
City DAYTONA BEACH FL Zip Code 32117

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ JAMES KING 7-6-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D REDIGAN, JOHN 2901 NORTH HALIFAX AVE #205 DAYTONA BEACH, FL 32118	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CHAIR ELECT NIELAN, KELLIE 469 RIVER BREEZE DR ORMOND BEACH, FL 32176	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T KENNEDY, ADAM 112 TERN CT. DAYTONA BEACH, FL 32114	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	IMMEDIATE PAST CHAIR BOSMAN, TOM 702 HONSEL HILL RD PORT ORANGE, FL 32127	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CB RICE, RICHARD 9 PALMETTO DUNES CT ORMOND BEACH, FL 32174	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BRADLEY, GORDNER 50 CONCORD DRIVE ORMOND BEACH, FL 32176	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CHAIRMAN OF BOARD	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KACZYNSKI, MARGIE 682 BRANCH DR PT ORANGE, FL 321273808	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SNYDER, JIM 2041 ANCHOR AVENUE DELAND, FL 32721	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY JOYE, RACHEL 1028 FLYING M COURT EDGEWATER, FL 32132	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ BRADLEY GORDNER 7-6-06 386-274-4736
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #