

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706811

FILED
Feb 13, 2006
Secretary of State

Entity Name: CENTRAL FLORIDA FIRE CHIEFS ASSOCIATION INC.

Current Principal Place of Business:

PO BOX 547894
ORLANDO, FL 32854 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 547894
ORLANDO, FL 32854 US

New Mailing Address:

FEI Number: 59-2901635 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FOWLER, JAMES A ATTY
28 W CENTRAL BLVD
ORLANDO, FL 32801 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: ST () Delete
Name: GASTON, GEORGE S
Address: 2914 CARROLL PLACE
City-St-Zip: ORLANDO, FL 32804

Title: P () Delete
Name: HAUN, CRAIG
Address: 235 RINEHART ROAD
City-St-Zip: LAKE MARY, FL 32746

Title: D () Delete
Name: WHITE, JAMES
Address: 343 WEST CANTON AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: V () Delete
Name: WILLIAMSON, JOHN
Address: 131 EAST PALMETTO STREET
City-St-Zip: WINTER GARDEN, FL 34787

Title: D () Delete
Name: STROSNIER, RONALD D
Address: 3416 JOHIO SHORES DRIVE
City-St-Zip: OCOEE, FL 34761

Title: D () Delete
Name: RANSOM, GERARD
Address: 1303 S. FRENCH AVE.
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: HAUN, CRAIG
Address: 911 WALLACE COURT
City-St-Zip: LAKE MARY, FL 32746

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

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

Title: D (X) Change () Addition
Name: LEWIS, CHARLIE
Address: 1300 NINTH STREET, BUILDING A, 2ND FLOOR
City-St-Zip: ST. CLOUD, FL 34769

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: GEORGE S. GASTON

ST

02/13/2006

Electronic Signature of Signing Officer or Director

Date