

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jan 26, 2006 8:00 am**  
**Secretary of State**

01-26-2006 90033 030 \*\*\*\*61.25

**DOCUMENT # 710623**

1. Entity Name

**SOUTHEAST VOLUSIA KC BUILDING ASSOCIATION  
INC.**



Principal Place of Business

**516 SOUTH ORANGE AVENUE  
NEW SMYRNA BEACH FL 32168**

Mailing Address

**516 SOUTH ORANGE AVENUE  
NEW SMYRNA BEACH FL 32168**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

**93-0820067**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ANDREANO, JOSEPH  
724 GREEN ROAD  
NEW SMYRNA BEACH FL 32168**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 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

TITLE **D** ☐ Delete  
NAME **YOUKON, MUHAELW**  
STREET ADDRESS **767 FOX HOUND DRIVE**  
CITY-ST-ZIP **PORT ORANGE FL 32128**

TITLE **D** ☐ Delete  
NAME **CATALANO, VINCENT**  
STREET ADDRESS **1203 WAYNE AVE.**  
CITY-ST-ZIP **NEW SMYRNA BEACH FL 32168**

TITLE **DP** ☐ Delete  
NAME **AMALFITANO, ALBERT**  
STREET ADDRESS **1531 S RIVERSIDE DR**  
CITY-ST-ZIP **EDGEWATER FL 32132**

TITLE **DT** ☐ Delete  
NAME **SKOWRONSKI, JAMES W**  
STREET ADDRESS **400 SEA GULL CT**  
CITY-ST-ZIP **EDGEWATER FL 32141**

TITLE **DS** ☐ Delete  
NAME **STUDER, FREDERICK**  
STREET ADDRESS **1205 WAYNE AVENUE**  
CITY-ST-ZIP **NEW SMYRNA BEACH FL 32168**

TITLE **DVP** ☐ Delete  
NAME **ANDRENNO, JOC**  
STREET ADDRESS **724 GREEN RD**  
CITY-ST-ZIP **NEW SMYRNA BEACH FL 32168**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition  
NAME **youkon, Michael**  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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

*Joseph Andreano* 1/13/06 (386) 1689-6769