

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

FILED
Jun 12, 2006 8:00 am
Secretary of State

06-12-2006 90004 043 ****61.25

DOCUMENT # 712448	
1. Entity Name ORGANIZED FISHERMEN OF FLORIDA, INC.	

Principal Place of Business 225 ROCKLEDGE DRIVE ROCKLEDGE FL 32955	Mailing Address PO BOX 700 COCOA FL 32923
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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 59-1234446		Applied For ☐	Not Applicable ☐
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SANSOM, JERRY 225 ROCKLEDGE DR. ROCKLEDGE FL 32955		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City	Zip Code
		FL	

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
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD COX, GEOFF 10115 KINESANBU RD. HASTINGS FL 32145 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD PETRICK, ROBERT 22962 CAPE KODD LANE SUMMERLAND KEY FL ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD DUSNON, MARTIN P.O. BOX 26 N/A POMONA PARK FL ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Addition <i>UP GARY TILLIS PO BOX 1048 STEIN GATSON, FL 32359</i>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD ORR, BENNETT PO BOX 501054 MARATHON FL 33050 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PP CLOPTON, JOHNNIE 2101 WELLS AVE NAYARRE FL 32301 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☒ Change ☐ Addition <i>7007 REYNOLD GARDEN RD. MULLEN, FL 32582</i>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P DAY, RONNIE P.O. BOX 132 SAINT MARKS FL 32355 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

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: *R. Day* **RONNIE DAY** 5/1/06 321-773-8210