

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

FILED
Feb 20, 2006 08:00 AM
Secretary of State

DOCUMENT # 713272

1. Entity Name
CROOM-A-COOCHIEE IMPROVEMENT CLUB, INC.



Principal Place of Business
**12621 CR 687
WEBSTER, FL 33597**

Mailing Address
**3895 C.R. 656
WEBSTER, FL 33597 US**



02162006 No Chg-NP CRZE037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2380672	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**JONES, JEAN
3895 C.R. 656
WEBSTER, FL 33597**

**DO NOT WRITE
IN THIS SPACE**

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 _____

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	SEESE, ANDREW
STREET ADDRESS	12544 CR 684
CITY- ST- ZIP	WEBSTER, FL 33597

TITLE	VP
NAME	MESSER, TOMMY
STREET ADDRESS	12166 SW 46 ST.
CITY- ST- ZIP	WEBSTER, FL 33597

TITLE	TD
NAME	JONES, JEAN
STREET ADDRESS	3895 C.R. 656
CITY- ST- ZIP	WEBSTER, FL

TITLE	D
NAME	VANTOL, DON
STREET ADDRESS	4786 SW 122ND LANE
CITY- ST- ZIP	WEBSTER, FL 33597

TITLE	D
NAME	SHEPHERD, TOM
STREET ADDRESS	12268 CR 684
CITY- ST- ZIP	WEBSTER, FL 33597

TITLE	D
NAME	YOUNG, BEATRICE
STREET ADDRESS	12327 CR 684
CITY- ST- ZIP	WEBSTER, FL 33597

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03/02/06-80015-013 61.25

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IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-16-06 **352**
993-6483

Date

Daytime Phone #