

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2006 8:00 am
Secretary of State

01-27-2006 90021 013 ****61.25

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01232006 Chg-NP CR2E037 (11/05)

4. FEI Number
23-7424299

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BELLOS, LARRY K
629 GARDENIA DR
VENICE, FL 34285

7. Name and Address of New Registered Agent

Name **MAGEE, RICHARD A.**

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

628 GARDENIA DRIVE

City **VENICE**

FL

Zip Code **34285**

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

R. Magee

RICHARD A. MAGEE, TREASURER

1-23-06

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 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 **P** ☐ Delete
NAME **LEDEDUN, BRUCE**
STREET ADDRESS **405 MAHON DR**
CITY-ST-ZIP **VENICE, FL 34285**

TITLE **S** ☐ Delete
NAME **RANALLI, JOYCE**
STREET ADDRESS **409 MAHON**
CITY-ST-ZIP **VENICE, FL 34285**

TITLE **T** ☒ Delete
NAME **BELLOS, LARRY K**
STREET ADDRESS **629 GARDENIA DR**
CITY-ST-ZIP **VENICE, FL 34285**

TITLE **V** ☐ Delete
NAME **FRASER, BETSY**
STREET ADDRESS **619 GARDENIA DR**
CITY-ST-ZIP **VENICE, FL 34285**

TITLE **D** ☐ Delete
NAME **LEYTZE, KEVIN**
STREET ADDRESS **609 GARDENIA DR**
CITY-ST-ZIP **VENICE, FL 34285**

TITLE **D** ☐ Delete
NAME **WHALEN, BILL**
STREET ADDRESS **433BAYNARD DR**
CITY-ST-ZIP **VENICE, FL 34285**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☒ Addition
NAME **MAGEE, RICHARD A.**
STREET ADDRESS **628 GARDENIA DRIVE**
CITY-ST-ZIP **VENICE FL 34285**

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 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:

R. Magee

RICHARD A. MAGEE, TREASURER

1-23-06

6240

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #