

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723709

FILED  
Jan 18, 2006  
Secretary of State

**Entity Name:** PONCE DELEON INLET LIGHTHOUSE PRESERVATION ASSOCIATION, INC.

**Current Principal Place of Business:**

4931 SOUTH PENINSULA DRIVE  
PONCE INLET, FL 32127

**New Principal Place of Business:**

**Current Mailing Address:**

4931 SOUTH PENINSULA DRIVE  
PONCE INLET, FL 32127

**New Mailing Address:**

**FEI Number:** 23-7258586

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WICKERSHAM, CHRISTOPHER, W, SR  
501 NORTH GRANDVIEW  
DAYTONA BECH, FL 32118 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: PT ( ) Delete  
Name: HURD, ROBYN  
Address: 125 INLET HARBOR ROAD  
City-St-Zip: PONCE INLET, FL 32127

Title: 1VP ( ) Delete  
Name: LEWIS, TAMI  
Address: 108 PONCE DELEON CIRCLE  
City-St-Zip: PONCE INLET, FL 32127

Title: 2VP ( ) Delete  
Name: MERRELL, WILLIAM  
Address: 4784 SOUTH PENINSULA DRIVE  
City-St-Zip: PONCE INLET, FL 32127

Title: TR ( ) Delete  
Name: RIGGIO, ROBERT  
Address: 2 DAGGETT COVE  
City-St-Zip: PONCE INLET, FL 32127

Title: SEC ( ) Delete  
Name: GIROLAMI, ANTHONY  
Address: 47 INLET POINT  
City-St-Zip: PONCE INLET, FL 32127

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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: ANN CANEER

DIR

01/18/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date