


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 17, 2006 8:00 am**  
**Secretary of State**

04-17-2006 90358 008 \*\*\*\*61.25

<b>DOCUMENT # 726015</b> 1. Entity Name <b>THE ANCHORAGE OF COCOA BEACH INC.</b>					
Principal Place of Business <b>1611 MINUTEMEN CSWY COCOA BCH, FL 32931</b>			Mailing Address <b>1611 MINUTEMEN CSWY BOX #312 COCOA BEACH, FL 32931 US</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
Country		Country		Country	
<b>6. Name and Address of Current Registered Agent</b>  <b>KRUGER, EVELYN W 1611 MINUTEMEN CSWY #208 COCOA BEACH, FL 32931</b>				<b>7. Name and Address of New Registered Agent</b> Name <b>MARY WORTMAN</b> Street Address (P.O. Box Number is Not Acceptable) <b>1611 Minutemen Cswy #110</b> City <b>Cocoa Beach</b> <b>FL</b> Zip Code <b>32931</b>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees		<b>Make check payable to Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD <b>LICHTENBERGER, LAUREL 1611 MINUTEMEN CAUSEWAY #308 COCOA BCH., FL 32931</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b><del>Lichtenberger</del> Laurel</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD <b>WORTMAN, MARY 1611 MINUTEMEN CSWY #110 COCOA BEACH, FL 32931</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b><del>P D Wortman</del> mary</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>BRENER, BARBARA 1611 MINUTEMEN CSWY #106 COCOA BEACH, FL 32931</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b><del>DD ST</del> Brewer, Barbara</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <b>HEWITT, CAROLYN 1605 MINUTEMEN CSWY #48 COCOA BEACH, FL 32931</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b><del>DD ST</del> D Roller, Amy 1611 minutemen cswy # 305 Cocoa Beach Fl. 32931</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV <b>RAY, CLIFFORD 1605 MINUTEMEN CSY #218 COCOA BEACH, FL 32931</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b><del>VP</del> Ker Slemers 1611 Minutemen Cswy #104</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <b>KRUGER, EVELYN W 1611 MINUTEMEN CSWY #208 COCOA BEACH, FL 32931</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b><del>ED</del> Kruger, Evelyn</b>		
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.					
<b>SIGNATURE:</b> <u>Mary Wortman</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u>4/10/06</u> <small>Date</small>		<u>321 784-4478</u> <small>Daytime Phone #</small>	