2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006
Secretary of State

DOCUMENT# 732662

Entity Name: SEMINOLE COUNTY BAR ASSOCIATION, INC.

Current Principal Place of Business:

180 NORTH PARK AVENUE
SUITE 200
WINTER PARK, FL 32789 US

New Principal Place of Business:

101 W. FIRST STREET
SUITE C
SANFORD, FL 32771 US

Current Mailing Address:

180 NORTH PARK AVENUE
SUITE 200
WINTER PARK, FL 32789 US

New Mailing Address:

101 W. FIRST STREET
SUITE C
SANFORD, FL 32771 US

FEI Number: 59-2194248 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BLEDSOE, TERRY L
180 NORTH PARK AVENUE
SUITE 200
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

SWANSON, CAROL A ESQ.
801 N. MAGNOLIA AVENUE
SUITE 418
ORLANDO, FL 32803 US

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: CAROL ANN SWANSON 03/13/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BLEDSOE, TERRY L
Address: 1009 E HWY. 436
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: T ( ) Delete
Name: REED, DEAN A
Address: 890 S.R. 434 NORTH
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: PE ( ) Delete
Name: COLEGROVE, RICHARD
Address: P.O. BOX 726
City-St-Zip: SANFORD, FL 32772

Title: S ( ) Delete
Name: SWANSON, CAROL
Address: 801 N. MAGNOLIA AVE.
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: COLEGROVE, RICHARD A ESQ.
Address: 101 W. FIRST ST., SUITE C
City-St-Zip: SANFORD, FL 32771

Title: PE (X) Change ( ) Addition
Name: SWANSON, CAROL A ESQ.
Address: 801 N. MAGNOLIA AVE., SUITE 418
City-St-Zip: ORLANDO, FL 32803

Title: S (X) Change ( ) Addition
Name: REED, DEAN A ESQ.
Address: 890 N. STATE ROAD 434
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: T (X) Change ( ) Addition
Name: CHASE, MELANIE F ESQ.
Address: 200 COLONIAL CENTER PKWY., SUITE 550
City-St-Zip: LAKE MARY, FL 32746

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: MELANIE F. CHASE T 03/13/2006
Electronic Signature of Signing Officer or Director Date