

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 04, 2006 8:00 am
Secretary of State

04-04-2006 90143 046 ****61.25

DOCUMENT # 734238

1. Entity Name

FLORIDA STATE CHAPTER ITPA, INC.



Principal Place of Business

SPRINT ITPA
APOPKA FL 32703
US

Mailing Address

7267 SPRINGHILL RD
TALLAHASSEE FL
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

52-1254544

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/05)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BROWN, NANCY E
7267 SPRINGHILL RD
TALLAHASSEE FL 32310

Name

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

City

FL

Zip Code

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 re-registering)

DATE

FILE NOW: 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
TURNER, RUSTY
1809 LOCH BERRY RD
WINTER PARK FL 32789 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
V
MCDANIEL-MORGAN, KIM
P.O. BOX 165000
ALTAMONTE SPRINGS FL 32716 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
KELLY, CAROLYN
555 LAKE BORDER DR.
APOPKA FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
T
BROWN, NANCY E
7267 SPRINGHILL RD.
TALLAHASSEE FL 32310 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
KINGSLEY, JERRY
2285 SUNRISE BLVD
FORT MYERS FL 33907 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
CARPENTER, JOHN
425 N. 3RD ST.
LEESBURG FL 34748 ☐ Delete

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Nancy E. Brown* NANCY E. BROWN 3-29-06 576-2390

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #