2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 03, 2006 8:00 am
Secretary of State
05-01-2006 90370 046 ****61.25

DOCUMENT # 735511

1. Entity Name
GENEALOGICAL SOCIETY OF OKALOOSA COUNTY, FLORIDA, INC.

66021202

Principal Place of Business	Mailing Address
343 SHANNON CT FORT WALTON BEACH, FL 32548 US	PO BOX 1175 FT. WALTON BCH, FL 32549 US

04132006 Chg-NP CR2E037 (11/05)

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 51-0201772 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

LICARI, CHARLES J
343 SHANNON CT
FORT WALTON BEACH, FL 32548

7. Name and Address of New Registered Agent

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 Charles J Licari LICARI, Charles J.
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LICARY, CHARLES J 343 SHANNON CT FORT WALTON BEACH, FL 32548	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HARRIS, MARGARET 239 LAFITTE CRESCENT FORT WALTON BEACH, FL 32547	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD RUCKEL, C W 222 ROCKWOOD LN NICEVILLE, FL 32578	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD GROSS, BEVERLY 4468 WOODBRIDGE RD NICEVILLE, FL 32578	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BARTMESS, RITA 129 WILLARD RD NW FORT WALTON BEACH, FL 32548	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition D Dan Braxton 108 Azalea Circle Valparaiso, FL 32580
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD LA CROSS, JOAN 379 GANDREA DR FORT WALTON BEACH, FL 32548	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: 29 June 2006
Dan Braxton for
CHARLES J. LICARI
PRESIDENT / GSOC

NOTE: DAN BRAXTON IS THE MEMBERSHIP AND ASSISTANT FINANCIAL VP

ATTACHMENT

June 22, 2006

Dan: 66021202

At Chuck's request, I called Tallahassee about the report's return for the second time. According to the fellow I spoke with, a signature is also required in Block 12. Would you please sign, make a copy for GSOC files, and mail the signed copy back to Tallahassee with their cover letter. Please and thanks!

Kate

Accomplished 29 Jun 06

ATTACHMENT
66021202

FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 18, 2006

GENEALOGICAL SOCIETY OF OKALOOSA COUNTY, FLORIDA, INC.
PO BOX 1175
FT. WALTON BCH, FL 32549 US

Subject: **GENEALOGICAL SOCIETY OF OKALOOSA COUNTY, FLORIDA, INC.**

Reference Number: **735511**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling $61.25; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation. -The report clearly shows the signature of Charles J. Licari, President/Director

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

Tried calling — Dropped!

6/12/06

/JD
ANNUAL REPORTS SECTION

I did not print any name on the block but that is my signature —
Charles J. Licari, Pres/Dir
thank you
Charles J. Licari

P.O. BOX 6327 - Tallahassee, Florida 32314