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

## **Secretary of State DOCUMENT # 741918** 1. Entity Name 02-07-2006 90025 022 \*\*\*\*61.25 THE M-T BOTTLE COLLECTORS ASSOCIATION, INC. Principal Place of Business Mailing Address P.O. BOX 1581 DELAND FL 32721 P.O. BOX 1581 DELAND FL 32721 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State 4. FEI Number City & State Applied For 59-2780326 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CHARLES BENTON, CHARLES O 1004 HARTFORD DRIVE Street Address (P.O. Box Number is Not Acceptable) 1004 HARTFORD DRIVE 1200 JACOBS RD DELAND FL 32724 Zip Code **3**27*2 4* DELAND 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 reinstating) FILE NOW: FEE IS \$61.25 \$5.00 May Be 9. Election Campaign Financing Make Check Pavable to Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. Delete Change TITLE TITLE CHARLES O. BENTON NAME RADECK, ROGER NAME 1004 HARTFORD DRIVE 1570 HUMPHREY BLVD STREET ADDRESS STREET ADDRESS DELAND, FL 32724 DELTONA FL 32738 CITY-ST-ZIP CITY - ST - ZIP TITLE ☐ Delete TITLE ☐ Addition ☐ Change MARKS, CHARLES NAME NAME 1030 BLUE HORIZON DRIVE STREET ADDRESS STREET ADDRESS **DELTONA FL 32725** CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME MARKS, SALLY J NAME STREET ADDRESS 1030 BLUE HORIZON DRIVE STREET ADDRESS CITY-ST-ZIP **DELTONA FL 32725** CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition TITLE SCOTT, GEORGE NAME NAME STREET ADDRESS 2656 GRANDVIEW AVE STREET ADDRESS SANFORD FL 32771 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ■ Addition ROWELL, N. GRADY NAME NAME 200 BREUITA LANE STREET ADDRESS STREET ADDRESS DELAND FL 32724 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change ☐ Addition DREGGORS, WILLIAM NAME NAME 27 JASMINE DRIVE STREET ADDRESS STREET ADDRESS DEBARY FL 32713 CITY-ST-ZIP CITY-ST-ZIP

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

CHARLES W. MARKS

if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED

Feb 07, 2006 8:00 am

January 26 1001 (281) 799.5155