

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2006 8:00 am**  
**Secretary of State**

05-02-2006 90212 007 \*\*\*\*61.25

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<b>DOCUMENT # 750729</b> 1. Entity Name <b>PLAYGROUND GEM AND MINERAL SOCIETY, INC.</b>					
Principal Place of Business <b>17 1ST STREET FORT WALTON BEACH, FL 32548 US</b>				Mailing Address <b>17-B FIRST STREET S.E. FORT WALTON BEACH, FL 32548 US</b>	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		03152006 Chg-NP CR2E037 (11/05)	
Zip		Country		4. FEI Number <b>59-1940286</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>REIKO CHAFIN 1004 BEACHVIEW DR. FORT WALTON BEACH, FL 32547</b>				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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 <u>Reiko Chafin, Reiko Chafin, Treasurer</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</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 May Be Added to Fees</b>		<b>Make check payable to Florida Department of State</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	TR	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CHAFIN, REIKO		NAME	S. Baggett, Janet	
STREET ADDRESS	1004 BEACHVIEW DR.		STREET ADDRESS	312 Brooks St. Ft. Walton Beach	
CITY-ST-ZIP	ORLANDO, FL 328172809		CITY-ST-ZIP	FL 32548	
TITLE	S	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	PHILLIPS SHARON L.		NAME	P. Weston, Al	
STREET ADDRESS	9 BAYVIEW DRIVE		STREET ADDRESS	701 Overbrook Dr.	
CITY-ST-ZIP	SHALIMAR, FL		CITY-ST-ZIP	Ft. Walton Beach, FL 32547	
TITLE	P	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	KELLY, MARY PRESIDE		NAME	D. Keiko Jones	
STREET ADDRESS	119 ELM AVENUE		STREET ADDRESS	207 Pawnee Cir	
CITY-ST-ZIP	FORT WALTON BEACH, FL 32548		CITY-ST-ZIP	Ft. Walton Beach, FL 32547	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	BAGGETT, JANET DIRECTO		NAME	D. Marjorie Ketchum	
STREET ADDRESS	312 BROOKS STREET		STREET ADDRESS	9 Mary Esther Dr.	
CITY-ST-ZIP	FORT WALTON BEACH, FL 32548		CITY-ST-ZIP	Mary Esther, FL 32569	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	FLORES, VINCENT		NAME		
STREET ADDRESS	218 BRADLEY DR.		STREET ADDRESS		
CITY-ST-ZIP	FORT WALTON BEACH, FL 32548		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WESTON, JULIE		NAME		
STREET ADDRESS	701 OVERBROOK DR		STREET ADDRESS		
CITY-ST-ZIP	FORT WALTON BEACH, FL 32547		CITY-ST-ZIP		
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>Reiko Chafin</u> <u>Reiko Chafin, Treasurer</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<small>Date</small> <span style="float: right;"><small>Daytime Phone #</small></span>					