

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761509

FILED  
Jan 05, 2006  
Secretary of State

Entity Name: THE SPECIAL GATHERING, INC.

## Current Principal Place of Business:

P.O. BOX 685  
COCOA, FL 329230685

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 685  
COCOA, FL 329230685

## New Mailing Address:

FEI Number: 59-2266042

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STIMSON, RICHARD  
6592 EMILE AVE  
COCOA, FL 32927 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: KRIEG, STEVE  
Address: P.O. BOX 627  
City-St-Zip: SCOTTSMOOR, FL 32775

Title: VD ( ) Delete  
Name: FLENNELLIN, ROBERT  
Address: 3890 VTES DR  
City-St-Zip: TITUSVILLE, FL 32796

Title: D ( ) Delete  
Name: HAMMETT, BILL  
Address: 1641 WIKIVA DR.  
City-St-Zip: MELBOURNE, FL 32940

Title: D ( ) Delete  
Name: WIHLBORG, DIAN  
Address: 386 CONCHA DRIVE  
City-St-Zip: SEBASTIAN, FL 329586502

Title: D ( ) Delete  
Name: DE ROSA, SUSAN  
Address: 195 MOHAWK AVE  
City-St-Zip: DELAND, FL 327241933

Title: D ( ) Delete  
Name: TANNER, SUSAN  
Address: 905 W. RICH AVE.  
City-St-Zip: DELAND, FL 32720

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: MCCLELLAN, ALICE  
Address: 1506 HARVARD DR.  
City-St-Zip: COCOA, FL 32922

Title: D (X) Change ( ) Addition  
Name: BIANCO, PRISCILLA  
Address: 1128 WHITE OAK CIR.  
City-St-Zip: MELBOURNE, FL 32934

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: STEVE KRIEG

PD

01/05/2006

Electronic Signature of Signing Officer or Director

Date