

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

FILED
Feb 13, 2006 08:00 AM
Secretary of State

DOCUMENT # 762753		
1. Entity Name NATIONAL ASSOCIATION OF FLORIDIAN CLUBS, INC.		

Principal Place of Business 8763 FOREST HILLS BLVD. CORAL SPRINGS FL 33065 US	Mailing Address 8763 FOREST HILLS BLVD. CORAL SPRINGS FL 33065 US
---	---

2. Principal Place of Business	3. Mailing Address
--------------------------------	--------------------

Suite, Apt. #, etc.	Suite, Apt. #, etc.
---------------------	---------------------

City & State	City & State
--------------	--------------

Zip	Country	Zip	Country
-----	---------	-----	---------

6 Name and Address of Current Registered Agent

**LEE, ETTER S
8763 FOREST HILLS BLVD.
CORAL SPRINGS FL 33065**

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 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

TITLE	TD	☐ Delete
NAME	FORD, LOUISE	
STREET ADDRESS	1611 E. 9TH STREET	
CITY- ST- ZIP	PANAMA CITY FL 32401	
TITLE	2VP	☐ Delete
NAME	PORTER, EDWARD	
STREET ADDRESS	257 W. 9TH STREET	
CITY- ST- ZIP	SAN PEDRO CA 90731	
TITLE	1VPD	☐ Delete
NAME	BRINSON, BARBARA	
STREET ADDRESS	5070 NW 41 PLACE	
CITY- ST- ZIP	LAUDERDALE LAKES FL 33319	
TITLE	P	☐ Delete
NAME	GODWIN, JAMES	
STREET ADDRESS	6922 N. 98 STREET	
CITY- ST- ZIP	MILWAUKEE WI 53224	
TITLE	RSD	☐ Delete
NAME	LEE, ETTER S	
STREET ADDRESS	8763 FOREST HILLS BLVD.	
CITY- ST- ZIP	CORAL SPRINGS FL 33065	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

11.

TITLE		☐ Change ☐ Add
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ Change ☐ Add
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ Change ☐ Add
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ Change ☐ Add
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ Change ☐ Add
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

**U000000431787
02/23/06-80040-018 61.25**

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.