

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 05, 2007 08:00 AM
Secretary of State

DOCUMENT # 763741

1. Entity Name

KENTUCKY COLONELS OF FLAGLER COUNTY, INC.



Principal Place of Business

P.O. BOX 350521
PALM COAST FL 32135-0521

Mailing Address

P.O. BOX 350521
PALM COAST FL 32135-0521



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E037 (10/06)

Zip

Country

Zip

Country

4. FEI Number

59-2350666

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BREITENBERG, BRITT
117 FARRAGUR DR
PALM COAST FL 32137

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, 2007

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 ☐ Delete
NAME D
STREET ADDRESS EDMOND, KOHDGIE
CITY-ST-ZIP 16 MARINA PT PLACE
GEORGETOWN FL 32139

TITLE ☐ Delete
NAME VP
STREET ADDRESS ROBERT, MANGONE
CITY-ST-ZIP 39 KINGSLEY CIRCLE
ORMOND BEACH FL 32174

TITLE ☐ Delete
NAME 2VP
STREET ADDRESS ERIC, ERNST
CITY-ST-ZIP 431 LONG COVE RD
ORMOND BEACH FL 32174

TITLE ☐ Delete
NAME BM
STREET ADDRESS JAMES, ED
CITY-ST-ZIP 465 LAMBERT AVE
FLAGLER BEACH FL 32136

TITLE ☐ Delete
NAME T
STREET ADDRESS DONDONA, ANTHONY J.
CITY-ST-ZIP 2 PENNYPACKER LANE
PALM COAST FL

TITLE ☐ Delete
NAME BM
STREET ADDRESS MCCARTHY, WILLIAM
CITY-ST-ZIP 509 OYSTER BAY DR.
ORMOND BEACH FL 32174

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME U00000622974
STREET ADDRESS 02/13/07-80047-025 61.25
CITY-ST-ZIP

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

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *ANTHONY J. DONDONA*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FEB 2 2007

386-445-0569