

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003108

FILED
Jan 23, 2006
Secretary of State

Entity Name: FLORIDA DISABLED ANGLERS, INC.

Current Principal Place of Business:

2525 GLENWOOD DR.
EDGEWATER, FL 32141

New Principal Place of Business:

Current Mailing Address:

2525 GLENWOOD DR.
EDGEWATER, FL 32141

New Mailing Address:

FEI Number: 59-3649445

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DONALD W. DUNCAN, P.A.
21 OLD KINGS RD N
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

DONALD W. DUNCAN, P.A.
2525 GLENWOOD DR.
EDGEWATER, FL 32141 US

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: GEORGE H. RICHARDSON

01/23/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HEIDGERKEN, JERALD
Address: 13704 COUNTRY CLUB DR.
City-St-Zip: TAVARES, FL 32778

Title: VD () Delete
Name: LAZARUS, NEAL
Address: 6425 CRESTVIEW RD.
City-St-Zip: ORLANDO, FL 32810

Title: S () Delete
Name: TERWILLIGER, BRIAN
Address: 110 LAKE MINNIE DR.
City-St-Zip: SANFORD, FL 32773

Title: TD () Delete
Name: RICHARDSON, GEORGE
Address: 2525 GLENWOOD DR.
City-St-Zip: EDGEWATER, FL 32141

Title: D () Delete
Name: GUIMARIN, PAUL
Address: 1426 LANTRY CT.
City-St-Zip: ORLANDO, FL 32804

Title: D () Delete
Name: MORRIS, DEAN
Address: 25564 BIMINI DR.
City-St-Zip: TAVARES, FL 32778

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: TERWILLIGER, BRIAN E
Address: 110 LAKE MINNIE DR.
City-St-Zip: SANFORD, FL 32773

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

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

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: BRIAN E. TERWILLIGER

S

01/23/2006

Electronic Signature of Signing Officer or Director

Date