2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004710

FILED Apr 24, 2006 Secretary of State

Entity Name: FORT WHITE COMMUNITY THRIFT SHOP INC

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
	OULTER AVE HITE, FL 3203				
Current Mailing Address:			New Mailing Addı	New Mailing Address:	
PO BOX 9 FT WHITE	96 E, FL 32038				
FEI Number	: 59-3725169	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Addres	Name and Address of New Registered Agent:	
BUSH, BETTY M 200 SOUTH COULTER STREET FORT WHITE, FL 32038 US				BUSH, BETTY M 163 SOUTH WEST COULTER AVENUE FORT WHITE, FL 32038 US	
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registe	ered office or registered agent, or both	
SIGNATURE:				04/24/2006	
	Electro	nic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
Title: Name: Address:	BUSH, BETTY 224 SW MORE	ELAND BUSH CT	Title: Name: Address:	() Change () Addition	
City-St-Zip:	TORT WITE,	1 6 02000	City-St-Zip:		
Title: Vame: Address:) Delete RRY SR.	City-St-∠ip: Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address:	BM (MOSELEY, HA PO BOX 1321 LAKE CITY, FL D (MOSELEY, CO 1038 SW CR 1) Delete RRY SR. . 32056) Delete DNNIE G 8	Title: Name: Address:	() Change () Addition () Change () Addition	
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: City-St-Zip:	BM (MOSELEY, HA PO BOX 1321 LAKE CITY, FL D (MOSELEY, CO 1038 SW CR 1 FORT WHITE, D (ROACH, JAME 1306 N W 51S) Delete RRY SR. . 32056) Delete DNNIE G 8 FL 32038) Delete S W	Title: Name: Address: City-St-Zip: Title: Name: Address:	., .	

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: BETTY M. BUSH SEC/ 04/24/2006