

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00611

FILED
Apr 03, 2006
Secretary of State

Entity Name: NAPM - FLORIDA GULF COAST INC.

Current Principal Place of Business:

PO BOX 17708
CLEARWATER, FL 33762 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 17708
CLEARWATER, FL 33762 US

New Mailing Address:

FEI Number: 59-2434365

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARNEY, SAM
1814 BUNKER HILL DR
SUN CITY CENTER, FL 33573 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: VD () Delete
Name: DIERKING, MARK
Address: 1782 CALUMET ST
City-St-Zip: CLEARWATER, FL 33765

Title: PD () Delete
Name: SWITZER, VIRGINIA
Address: 7990 114TH AVE
City-St-Zip: LARGO, FL 33773

Title: TD () Delete
Name: FARNEY, SAM
Address: 1814 BUNKER HILL DR.
City-St-Zip: SUN CITY CENTER, FL 33573

Title: S () Delete
Name: POTTER, DIANNE
Address: 5274 68TH WAY
City-St-Zip: PINELLAS PARK, FL 33709

Title: D () Delete
Name: KILBRIDGE, MARY ELLEN
Address: 406 REO ST STE 220
City-St-Zip: TAMPA, FL 33609

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: () 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: SAMUEL D. FARNEY

TD

04/03/2006

Electronic Signature of Signing Officer or Director

Date