

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 03, 2006
Secretary of State**

DOCUMENT# N01000005855

Entity Name: ADRIAN C. FLETCHER AND ANNIE MURIEL FLETCHER FOUNDATION, INC.

Current Principal Place of Business:

PO BOX 333
GREENSBORO, FL 32330

New Principal Place of Business:

Current Mailing Address:

PO BOX 333
GREENSBORO, FL 32330

New Mailing Address:

FEI Number: 59-3738387 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BRIDGES, JANET FLETCHER
128 MATTHEW CLARK RD.
QUINCY, FL 32351 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: D () Delete
Name: HALL, GLENDA F
Address: PO BOX 605
City-St-Zip: MARY ESTHER, FL 32569

Title: D () Delete
Name: FENN, ROSALYN F
Address: PO BOX 323
City-St-Zip: GREENSBORO, FL 32330

Title: D () Delete
Name: FLETCHER, A. CLARK
Address: 511 HOPKINS LANDING
City-St-Zip: QUINCY, FL 32351

Title: D () Delete
Name: BRIDGES, JANET F
Address: PO BOX 333
City-St-Zip: GREENSBORO, FL 32330

Title: D () Delete
Name: VICE, PATRICIA F
Address: PO BOX 550
City-St-Zip: GREENSBORO, FL 32330

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: JANET F. BRIDGES

MS.

05/03/2006

Electronic Signature of Signing Officer or Director

_____ Date