



# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 12, 2006 8:00 am**  
**Secretary of State**

01-12-2006 90198 028 \*\*\*\*70.00

<b>DOCUMENT # N01000006732</b> 1. Entity Name OCALA ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS, INC.					
Principal Place of Business 2133 SE FT KING ST OCALA, FL 34471			Mailing Address 2133 SE FT KING ST OCALA, FL 34471		
2. Principal Place of Business 2935 SE 58th Ave Suite, Apt. #, etc. Ste #2 City & State Ocala, FL Zip 34471 Country USA		3. Mailing Address PO Box 830214 Suite, Apt. #, etc. City & State Ocala, FL Zip 34483 Country USA			
4. FEI Number 59-3758837				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				01102006 Chg-NP CR2E037 (11/05)	
6. Name and Address of Current Registered Agent- MIDGETT, DAVID E 1521 SE 36TH AVE OCALA, FL 34471			7. Name and Address of New Registered Agent 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: <u>Melanda Intihar</u> DATE: <u>1-10-06</u> <small>Signature, typed or printed name of registered agent and fee applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GRUBBS, TERESA 837 NE 25TH AVE OCALA, FL 34470	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Jim Spinelli 4211 SW 4th Ave Ocala, FL 34474	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SPINELLI, JOSEPH J JR 4210 SW 4TH AVE OCALA, FL 34474	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Vince Orlando 2935 SE 58th Ave #2 Ocala, FL 34471	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ORLANDO, VINCENT 2935 SE 58TH AVE OCALA, FL 34472	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V John Shields 206 SW 10th St #101 Ocala, FL 34477-2966	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KESTENBAUM, PAUL 2133 SE FT. KING ST OCALA, FL 34471	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Sandra Fernandez 2133 SE FT King St Ocala, FL 34471	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HENRY, BARBARA 2133 SE FT. KING ST OCALA, FL 34471	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Meranda Intihar 2935 SE 58th Ave Ste #2 Ocala, FL 34471	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TERRELL, RAYMOND 2156 S 5 BLVD OCALA, FL 34478	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Mark Stagle 2067 SE 45th St Ocala, FL 34480	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Melanda Intihar</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date: <u>1-10-06</u> Daytime Phone #	