

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008066

FILED
Jan 16, 2006
Secretary of State

Entity Name: UPPER CAPTIVA COMMUNITY CENTER FOUNDATION, INC.

Current Principal Place of Business:

4560 ORO PESOS LANE
PINELAND, FL 33945

New Principal Place of Business:

Current Mailing Address:

1235 YALE PLACE #907
MINNEAPOLIS, MN 55403

New Mailing Address:

FEI Number: 65-1156136

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARK, GARFIELD
13490 ROBERT RD
PINELAND, FL 33945 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: CLARK, GARFIELD
Address: 1235 YALE PLACE #907
City-St-Zip: MINNEAPOLIS, MN 55403

Title: D () Delete
Name: ANDREWS, MARCIA
Address: 4591 HODGE PODGE LANE
City-St-Zip: NORTH CAPTIVA, FL 33945

Title: D () Delete
Name: MCDONALD, MARY LLOYD
Address: 120 SWALLOW DRIVE
City-St-Zip: NORTH CAPTIVA, FL 33945

Title: D () Delete
Name: TOMPKINS, DAVID
Address: 4591 HODGE PODGE LANE
City-St-Zip: NORTH CAPTIVA, FL 33945

Title: D () Delete
Name: CLARK, SHARON
Address: 1235 YALE PLACE #907
City-St-Zip: MINNEAPOLIS, MN 55403

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: GARFIELD CLARK

D

01/16/2006

Electronic Signature of Signing Officer or Director

Date