

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2006 8:00 am
Secretary of State

01-17-2006 90244 034 ****70.00

DOCUMENT # N01438

1. Entity Name
**ALZHEIMER'S DISEASE AND RELATED DISORDERS
ASSOCIATION, INC.-FLORIDA GULF COAST CHAPTER**



Principal Place of Business
**9365 US HWY 19 N
SUITE B
PINELLAS PARK, FL 33782 US**

Mailing Address
**9365 US HWY 19 N
SUITE B
PINELLAS PARK, FL 33782 US**

60002517



01032006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business		3. Mailing Address		4. FEI Number 59-2378435		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			
City & State		City & State					
Zip	Country	Zip	Country				
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
SMITH, GLORIA J.T. 9365 US HWY 19 N SUITE B PINELLAS PARK, FL 33782				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City		FL	

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$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	CD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WELLNER, THOMAS			NAME			
STREET ADDRESS	100 SECOND AVE.			STREET ADDRESS			
CITY-ST-ZIP	ST. PETERSBURG, FL			CITY-ST-ZIP			
TITLE	SD	<input checked="" type="checkbox"/> Delete		TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	SILLIMAN, DIANNE			NAME	Hemness, Emma		
STREET ADDRESS	914 HICKORY FORK DRIVE			STREET ADDRESS	302 S. Massachusetts Ave.		
CITY-ST-ZIP	SEFFNER, FL 33584			CITY-ST-ZIP	Lakeland, FL 33801		
TITLE	P	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SMITH, GLORIA			NAME			
STREET ADDRESS	6551 SHORELINE DR. #6206			STREET ADDRESS			
CITY-ST-ZIP	SAINT PETERSBURG, FL 33708			CITY-ST-ZIP			
TITLE	VD	<input checked="" type="checkbox"/> Delete		TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	HAMILTON, ROBERTA			NAME	Babette Bach		
STREET ADDRESS	4196 BOWLING GREEN CIRCLE			STREET ADDRESS	1701 Hawthorne St.		
CITY-ST-ZIP	SARASOTA, FL 34233			CITY-ST-ZIP	Sarasota, FL 34236		
TITLE	TD	<input checked="" type="checkbox"/> Delete		TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	SCOTT, SEAN			NAME	Marx, Richard		
STREET ADDRESS	3233 EAST BAY DRIVE SUITE 104			STREET ADDRESS	4910 East Longboat Blvd.		
CITY-ST-ZIP	LARGO, FL 33771			CITY-ST-ZIP	Tampa, FL 33615		
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gloria J.T. Smith, CEO

Date

Daytime Phone #

1/9/06 727-578-2558

ATTACHMENT

#N01438

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Additions to Officers and Directors in 10

Director

Howard, Charlotte
1907 Shannonwood Court
Brandon, FL 33510-2641

Director

Edmond, Jimmy
5344 Spring Hill Drive
Spring Hill, FL 34606

Director

Connelly, Peggy
36181 East Lake Road #256
Palm Harbor, FL 34685

Director

Powell, Donna
5005 Sun-N-Lake Blvd.
Sebring, FL 33872

Director

Colby, Bruce
206 Second Street East
Bradenton, FL 34208

Director

McNulty, Terri
7236 Orchid Island Place
Lakewood Ranch, FL 34202

Director

Nunez, Margarita
9887 4th Street North, Suite 200
St. Petersburg, FL 33702

Director

Watson, Janie
803 West Imogene Street
Arcadia, FL 34266

ATTACHMENT

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Officers-Alzheimer's Association-Fla. Gulf Coast Chapter

Gloria J. T. Smith-President and CEO
9365 US Hwy 19 N., Suite B
Pinellas Park, FL 33782

Charles Albrecht-Senior Vice President
9365 US Hwy 19 N., Suite B
Pinellas Park, FL 33782