



# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 21, 2006 8:00 am**  
**Secretary of State**

02-21-2006 90026 038 \*\*\*\*61.25

<b>DOCUMENT # N02000000170</b> 1. Entity Name HEALTHY FLORIDA FOUNDATION LOBBY, INC.					
Principal Place of Business 200 S ORANGE AVE SUITE 2300 ORLANDO, FL 32802				Mailing Address 200 S ORANGE AVE SUITE 2300 ORLANDO, FL 32802	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
A.G.C. CO. 200 S ORANGE AVE SUITE 2300 ORLANDO, FL 32802				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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be</b> <b>Added to Fees</b>	
<b>Make check payable to</b> <b>Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCCOLLUM, BILL 200 S ORANGE AVE SUITE 2300 ORLANDO, FL 32802 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILSON, CECIL 1341 ORANGE AVE WINTER PARK, FL 32789 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KELLEHER, LAWRENCE J 700 UNIVERSE BOULEVARD NORTH PALM BEACH, FL 33408 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR PILHORN, RICHARD 617 EAST COLONIAL DRIVE ORLANDO, FL 32803 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input 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.					
<b>SIGNATURE:</b>  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			2/14/06 407-649-4050 <small>Date Daytime Phone #</small>		

Bill McCollum

Baker Hostetler

ATTACHMENT

40015837

#ND2000000170

Baker & Hostetler LLP

SunTrust Center, Suite 2300  
200 South Orange Avenue  
Orlando, FL 32801-3432

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February 17, 2006

Florida Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

direct dial: 407.649.4287  
e-mail:  
lbergstresser@bakerlaw.com

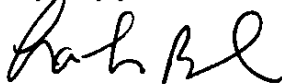
Re: 2006 UBR – Healthy Florida Foundation Lobby, Inc.  
Client-Matter No. 92050 -10574

Dear Sir or Madam:

Enclosed please find the 2006 Not-For-Profit Corporation Uniform Business Report for the above-referenced entity. Also enclosed is a check in the amount of \$61.25 to cover the cost of the filing fee.

Should you have any questions regarding the enclosed, please do not hesitate to contact me.

Very truly yours,



Laurie L. Bergstresser  
Paralegal

Enclosure

10574, 92050, 101226013