2007 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N02000000763



FILED Jan 22, 2007 8:00 am Secretary of State 01-22-2007 90078 006 ****61.25

Pincipal Place of Business - No P.O. Box # POP DRA 494707 PORT CHARLOTTE, FL 33949-4707 PORT CHARLOTTE, FL 33952 POR	CHARLO	TTE COUNTY GENEALOGK	CAL SOCIETY, INC.)		
Sullin, Apt. 9, etc. Sullin, Apt. 9, etc. Sullin, Apt. 9, etc. Sullin, Apt. 9, etc. Sullin, Apt. 9, etc. Sullin, Apt. 9, etc. Sullin, Apt. 9, etc. Sullin, Apt. 9, etc. Sullin, Apt. 9, etc. Sullin, Apt. 9, etc. Sullin, Apt. 9, etc. Application	PO BOX 494707 PO BOX 494707			33949-4707		1 0470 17170 18	
City & State Ci	2. Principal Place of Business - No P.O. Box # 3. !		3. Mailing Address				
Country Zep Country Zep Country S. Certification of Status Desired St. 75 Additional Feb Proquired St. 75 Additional Feb Propriet St. 7	Suite, Apt. #, etc.		Suite, Apt. #, etc.		01122007 Chg-NP CR2E037 (1)	2/06)	
S. Certificate of Status Desired Fee Required S. Certificate of Status Desired Fee Required S. Certificate of Status Desired Fee Required S. Certificate of Status Desired S. Reme and Address of Current Registered Agent S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. Street Address (P.O. Box Number is Not Acceptable) S. S. Street Address (P.O. Box Number	City & State	е	City & State				
Name AURENCE HURLEY	Zip	Country	Zip	Country			
MALONEY, JAMES J 1515 FORREST NELSON BLVD. A 101 PORT CHARLOTTE, FL 33952 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 obligators of registered agent. SIGNATURE City NDRT PORT FL 25,00% 30 C							
PORT CHARLOTTE, FL 33952 H	1515 FORREST NELSON BLVD.			LHU	LHWKENCE HURLEY		
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NOTE Signature, typed or before frame of registered Signature, typed or before frame of registered Signature, typed or before frame of registered Signature, typed or before from the frame of registered Signature, typed or before from the frame of registered Signature, typed or before from the frame of registered Signature, typed or before from the frame of registered Agont spore typed. Filling Fee s \$61.25 Due by: May 1, 2007 Trust Fund Contribution. Addition Ad							
Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE PD MALONEY. JAMES J PD Delete TITLE PORT CHARLOTTE, FL 33952 CITY-SI-ZIP CIT	SIGNATURE Signeture, typed or printed name of registered agent and title if applicable (NOTE: 9digistered Agent signature required when reinstating) DATE						
TITLE MAME MALONEY, JAMES JPD SIRET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE WAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE SD WALTON, JEANNETTE T SD STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE WAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE WAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE MAME CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33950 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33950 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33952 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33950 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33950 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33950 TITLE MAME STREET ADDRESS CITY-SI-ZIP PORT CHARLOTTE, FL 33950 TITLE MAME STREET ADDRESS CITY-SI-ZIP		- ,			TO THE PERSON OF		
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