

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002531

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: ABC THRIFT, INC.

## Current Principal Place of Business:

222 N. FEDERAL HWY.  
DANIA BEACH, FL 33004

## New Principal Place of Business:

## Current Mailing Address:

222 N. FEDERAL HWY.  
DANIA BEACH, FL 33004

## New Mailing Address:

FEI Number: 01-0631979

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DE COSTA, VIVIANNE  
600 NE 2ND ST, APT 306  
DANIA BEACH, FL 33004 US

## Name and Address of New Registered Agent:

NICKERSON, THOMAS  
1826 N 24 AVE  
HOLLYWOOD, FL 33020 US

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: THOMAS NICKERSON

04/28/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DE COSTA, VIVIANNE  
Address: 600 NE 2ND ST #306  
City-St-Zip: DANIA BEACH, FL 33004

Title: VD ( ) Delete  
Name: STAFFORD, ANNE M  
Address: 4730 SW 29TH TERRACE  
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: SD ( ) Delete  
Name: TRINKES, LINDA  
Address: 424 SE 3RD PL  
City-St-Zip: DANIA BEACH, FL 33004

Title: TD ( ) Delete  
Name: PERLMUTTER, STANLEY  
Address: 600 NE 2ND ST, #306  
City-St-Zip: DANIA BEACH, FL 33004

Title: D ( ) Delete  
Name: SHEEHAN, PATRICIA  
Address: 1445 ATLANTIC SHORES BLVD  
City-St-Zip: HALLANDALE, FL 33009

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: NICKERSON, THOMAS  
Address: 1826 N 24 AVE  
City-St-Zip: HOLLYWOOD, FL 33020

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: RUPPRECHT, RAY  
Address: 1117 GEORGIA ST  
City-St-Zip: KEY WEST, FL 33040

Title: D (X) Change ( ) Addition  
Name: NICKERSON, JODI  
Address: 3711 EAGLE AVE  
City-St-Zip: KEY WSET, FL 33040

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: THOMAS NICKERSON

PD

04/28/2006

Electronic Signature of Signing Officer or Director

Date