

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006963

FILED
Apr 06, 2006
Secretary of State

Entity Name: MASON DIXON CHRISTMAS WISH FUND, INC.

Current Principal Place of Business:

19633 EAGLE CREST DRIVE
LUTZ, FL 33549

New Principal Place of Business:

Current Mailing Address:

15321 LAKE MAURINE DRIVE
ODESSA, FL 33556

New Mailing Address:

19633 EAGLE CREST DRIVE
LUTZ, FL 33549

FEI Number: 45-0486620

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CRAWFORD, PATRICIA
19633 EAGLE CREST DR
LUTZ, FL 33549 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: PD () Delete
Name: CRAWFORD, JIM L
Address: 19633 EAGLE CREST DRIVE
City-St-Zip: LUTZ, FL 33549

Title: STD () Delete
Name: CRAWFORD, PATRICIA T
Address: 19633 EAGLE CREST DRIVE
City-St-Zip: LUTZ, FL 33549

Title: VD () Delete
Name: CRAWFORD, ALICIA
Address: 19633 EAGLE CREST DRIVE
City-St-Zip: LUTZ, FL 33549

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:

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: PATRICIA T. CRAWFORD

STD

04/06/2006

Electronic Signature of Signing Officer or Director

Date