


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 01, 2005 8:00 am**  
**Secretary of State**

04-01-2005 90026 032 \*\*\*\*61.25

**DOCUMENT # N02005**

1. Entity Name  
**PORT EVERGLADES CORROSION COORDINATING COMMITTEE, INC.**



Principal Place of Business  
**3410 S.E. 19TH AVENUE  
 FORT LAUDERDALE, FL 33316**

Mailing Address  
**P.O. BOX 13066  
 FT. LAUDERDALE, FL 33316**

2. Principal Place of Business  
**1200 SE 28<sup>TH</sup> ST**  
 Suite, Apt. #, etc.

3. Mailing Address  
**PO BOX 13107**  
 Suite, Apt. #, etc.

City & State  
**FORT LAUDERDALE, FL**

City & State  
**FORT LAUDERDALE, FL**

Zip  
**33316**

Country  
**USA**

Zip  
**33316**

Country  
**USA**

6. Name and Address of Current Registered Agent  
**BUNCHFIELD, JOHN  
 3510 S.E. 19TH AVENUE  
 FORT LAUDERDALE, FL 33316**

7. Name and Address of New Registered Agent  
 Name  
**DAVISON N. DE ARAUJO**  
 Street Address (P.O. Box Number is Not Acceptable)  
**801 SE 28<sup>TH</sup> ST.**  
 City  
**FORT LAUDERDALE, FL** Zip Code  
**33316**

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:  **DAVISON N. DE ARAUJO, TSD** DATE: **03-30-05**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

Filing Fee is **\$61.25**  
**Due by May 1, 2005**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

Make check payable to **Florida Department of State**

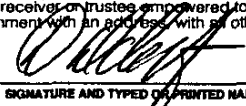
**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PITT, KEVIN P.O. BOX 13066 FORT LAUDERDALE, FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BEMER, DOUGLAS P.O. BOX 13066 FORT LAUDERDALE, FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BURCHFIELD, JOHN P.O. BOX 13066 FORT LAUDERDALE, FL 33316	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D RICH RIGGIO 1180 SPANGLER BLVD. FORT LAUDERDALE, FL 33316	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D LESTER MILLMAN 909 SE 24 <sup>TH</sup> ST FORT LAUDERDALE, FL 33316	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/S/D DAVISON N. DE ARAUJO 801 SE 28 <sup>TH</sup> ST FORT LAUDERDALE, FL 33316	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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"/> Change <input type="checkbox"/> Addition
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 exemption stated in Section 119.07(3)(i), 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:  **DAVISON N. DE ARAUJO** DATE: **3-30-05** DAYTIME PHONE #: **(954) 525-6742**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



03302005 Chg-NP CR2E037 (10/03)