2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02021

FILED Mar 22, 2006 Secretary of State

Entity Name: FLORIDA MINERALS AND CHEMISTRY COUNCIL, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O NANCY D. STEPHENS

C/O NANCY D. STEPHENS

1311 EXECUTIVE CENTER DRIVE, SUITE 225
TALLAHASSEE, FL 32301 US
TALLAHASSEE, FL 32317 US
TALLAHASSEE, FL 32317 US

Current Mailing Address: New Mailing Address:

C/O NANCY D. STEPHENS C/O NANCY D. STEPHENS

1311 EXECUTIVE CENTER DRIVE, SUITE 225
TALLAHASSEE, FL 32301 US
1625 SUMMIT LAKE DRIVE SUITE 300
TALLAHASSEE, FL 32317 US

FEI Number: 59-2422852 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STEPHENS, NANCY D, 1311 EXECUTIVE CENTER DRIVE SUITE 225 SUITE 300 STEPHENS, NANCY D, 1625 SUMMIT LAKE DRIVE SUITE 300

TALLAHASSEE, FL 32301 US TALLAHASSEE, FL 32317 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: 03/22/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition

itle: P () Delete Title: P (X) Change () Addition

Name: EMERT, DON Name: MIHALIK, DAVID
Address: 4575 HWY, 90 EAST Address: 1101 NORTH MADISON STREET

City-St-Zip: PACE, FL 32571 City-St-Zip: QUINCY, FL 32352

Title: D () Delete Title: D (X) Change () Addition Name: POSEY, STAN Name: LEITHEISER, JAMES

 Address:
 P. O. BOX 300
 Address:
 P. O. BOX 550850

 City-St-Zip:
 WHITE SPRINGS, FL 32096
 City-St-Zip:
 JACKSONVILLE, FL 32255

Title: ST () Delete Title: D (X) Change () Addition

 Name:
 BATTS, MIKE
 Name:
 BATTS, MIKE

 Address:
 2916 EAST PARK AVENUE
 Address:
 2916 EAST PARK AVENUE

Address: 2916 EAST PARK AVENUE Address: 2916 EAST PARK AVENUE

City-St-Zip: TALLAHASSEE, FL 30301 City-St-Zip: TALLAHASSEE, FL 30301

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$

 Name:
 PETERSON, REBECCA
 Name:
 FREELAND, ALLEN

 Address:
 P. O. BOX 97
 Address:
 P. O. BOX 66

 City-St-Zip:
 GONZALEZ, FL 325600097
 City-St-Zip:
 ST MARKS, FL 32355

 Name:
 FOX, ROBERT
 Name:
 RHEA, RICHARD

 Address:
 3012 HIGHWAY 301 NORTH SUTIE 700
 Address:
 P O BOX 66

 City-St-Zip:
 TAMPA, FL 33619
 City-St-Zip:
 ST MARKS, FL 32355

 Title:
 D
 (X) Delete
 Title:

 Name:
 MIHALIK, DAVID M
 Name:

 Address:
 1101 N. MADISON ST.
 Address:

 City-St-Zip:
 QUINCY, FL 32352
 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: NANCY D. STEPHENS RA 03/22/2006