## 2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N03000005635

TI FILED
Oct 04, 2006
Secretary of State

Entity Name: NORTHEAST COACHMAN PROFESSIONAL ASSOCIATION, INC.

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

2528 NE COACHMAN ROAD 2500 NE COACHMAN ROAD CLEARWATER, FL 33765 CLEARWATER, FL 33765

Current Mailing Address: New Mailing Address:

2528 NE COACHMAN ROAD CLEARWATER, FL 33765 2500 NE COACHMAN ROAD CLEARWATER, FL 33765 CLEARWATER, FL 33765

FEI Number: 86-1075388 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:

BRENNY, CHARLES R

2528 NE COACHMAN ROAD

CLEARWATER, FL 33765 US

ARCIERI, FRANCESCO
2500 NE COACHMAN ROAD
CLEARWATER, FL 33765 US

CLEARWATER, FL 33765 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: FRANCESCO ARCIERI 10/04/2006

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PT () Delete
 Title:
 PT (X) Change () Addition

 Name:
 ARCIERI, FRANK
 Name:
 ARCIERI, FRANCESCO

 Address:
 2500 NE COACHMAN ROAD
 Address:
 2500 NE COACHMAN ROAD

 City-St-Zip:
 CLEARWATER, FL 33765
 City-St-Zip:
 CLEARWATER, FL 33765

Address: 2528 COACHMAN RD. Address: 2528 COACHMAN RD. City-St-Zip: CLEARWATER, FL 33765 City-St-Zip: CLEARWATER, FL 33765

 $\label{eq:title:S} {\sf Title:S} \qquad \qquad {\sf S} \qquad {\sf (A) Change (A) Addition}$ 

 Name:
 DUTTER, RICHARD
 Name:
 ATKINSON, WILLIAM W

 Address:
 2528 COACHMAN RD
 Address:
 2528 COACHMAN RD

 City-St-Zip:
 CLEARWATER, FL 33765
 City-St-Zip:
 CLEARWATER, FL 33765

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: FRANCESCO ARCIERI PT 10/04/2006