2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006467

FILED Apr 04, 2006 Secretary of State

Entity Name: THE NORTH PORT AMATEUR RADIO CLUB, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: P.O. BOX 7716 NORTH PORT, FL 34287 **Current Mailing Address: New Mailing Address:** P.O. BOX 7716 NORTH PORT, FL 34287 FEI Number: 14-1893208 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: SANDERS, ALAN A 1344 MEDITERRANEAN DR # 121 PUNTA GORDA, FL 33950 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SANDERS, ALAN A Name: Name: 1344 MEDITERRANEAN DR #121 Address: Address: City-St-Zip: PUNTA GORDA, FL 33590 US City-St-Zip: Title: VD () Delete Title: VD (X) Change () Addition STUBBINS, ROBERT W Name: Name: SETTLE, JAMES S Address: 5098 SAN LUIS TERRACE Address: 8169 SAN JACINTO AVE City-St-Zip: NORTH PORT, FL 34286 US City-St-Zip: NORTH PORT, FL 34287 US Title: () Delete Title: () Change () Addition SNOVER, NICHOLAS Name: Name: 4280 CONRAD RD. Address: Address: City-St-Zip: VENICE, FL 34293 US City-St-Zip: Title: TD () Delete Title: TD (X) Change () Addition Name: KUEHN, GLENDA Name: PARMENTIER, ALAN O 4081 S.CHAMBERLEIN BLVD Address: Address: 670 EL TANGO City-St-Zip: NORTH PORT, FL 34286 US City-St-Zip: NORTH PORT, FL 34287 US

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: ALAN A, SANDERS PD 04/04/2006