

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 27, 2006 08:00 AM
Secretary of State

DOCUMENT # N03000008985

1. Entity Name

**AFSCME FLORIDA COUNCIL 79 BUILDING
CORPORATION**



Principal Place of Business

**3064 HIGHLAND OAKS TERR
TALLAHASSEE, FL 32301**

Mailing Address

**3064 HIGHLAND OAKS TERR
TALLAHASSEE, FL 32301**



03162006 No Chg-NP

CR2E037 (11/05)

4. FEI Number
03-0530823

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**ROBERTS, WILLIAM J
217 S ADAMS ST
TALLAHASSEE, FL 32301**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

**9. Election Campaign Financing
Trust Fund Contribution**



**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	WYNN, JEANNETTE D
STREET ADDRESS	3064 HIGHLAND OAKS TERR
CITY - ST - ZIP	TALLAHASSEE, FL 32301
TITLE	S
NAME	BARTLEY, JEANNETTE
STREET ADDRESS	3064 HIGHLAND OAKS TERR
CITY - ST - ZIP	TALLAHASSEE, FL 32301
TITLE	T
NAME	OTIS, KETHA
STREET ADDRESS	3064 HIGHLAND OAKS TERR
CITY - ST - ZIP	TALLAHASSEE, FL 32301
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

U000000482054
04/11/06-80059-020 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Jeannette D Wynn (Jeannette D. Wynn)

3/17/06

850-822-0842

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #