

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009305

FILED  
May 05, 2006  
Secretary of State

Entity Name: FLORIDA GOURD SOCIETY, INC.

**Current Principal Place of Business:**

1123 WOLVERINE TRAIL  
WINTER SPRINGS, FL 327084115

**New Principal Place of Business:**

**Current Mailing Address:**

1123 WOLVERINE TRAIL  
WINTER SPRINGS, FL 327084115

**New Mailing Address:**

FEI Number: 30-0211382      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

HARRIS, BRAD  
1123 WOLVERINE TRAIL  
WINTER SPRINGS, FL 32708      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:**

Title: PD      ( ) Delete  
Name: HARRIS, BRAD  
Address: 1123 WOLVERINE TRAIL  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: VD      ( ) Delete  
Name: SMALLEY, RONDA  
Address: 2374 FLOYD ST  
City-St-Zip: SARASOTA, FL 34239

Title: TD      ( ) Delete  
Name: REICH, ANN  
Address: 3513 VIA ATHNEA  
City-St-Zip: FT. MEYERS, FL 33017

Title: D      ( ) Delete  
Name: PASSERELL, LIZ  
Address: 13740 FOXGROVER STREET  
City-St-Zip: WINTER GARDEN, FL 34787

Title: D      ( ) Delete  
Name: HUNTER, LYN  
Address: 308 EVANS AVE  
City-St-Zip: INTERLACHEN, FL 32848

Title: SD      ( ) Delete  
Name: HUNTER, ROBERT  
Address: 308 EVANS AVE,  
City-St-Zip: INTERLACHEN, FL 32148

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
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: BRAD HARRIS

PD

05/05/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date