

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 01, 2006 8:00 am**  
**Secretary of State**

03-01-2006 90018 008 \*\*\*\*61.25

**DOCUMENT # N03000010151**

1. Entity Name

**VERO BEACH CHRISTIAN BUSINESS ASSOCIATION, INC.**



Principal Place of Business

1443-20TH ST  
STE E  
VERO BEACH FL 32960

Mailing Address

PO BOX 650242  
VERO BEACH FL 32965

2. Principal Place of Business

*2770 Indian River Blvd*

3. Mailing Address

Suite, Apt. #, etc.

*Suite 311*

City & State

*Vero Beach, FL*

City & State

Zip *32960*

Country *USA*

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

*20-0417328*

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**BROWN, E. ROLLINS II**  
3333 20TH ST.  
VERO BEACH FL 32960

7. Name and Address of New Registered Agent

Name *Dixie L. Powell*

Street Address (P.O. Box Number is Not Acceptable)

*2770 Indian River Blvd, Suite 311*

City

*Vero Beach*

FL

Zip Code

*32960*

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

*Dixie L. Powell*

*Dixie L. Powell, Treasurer 2/19/06*

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

(NOTE: Registered Agent signature required when reconstituting)

DATE

**FILE NOW: FEE IS \$61.25**

**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME GASKILL, KAREN ☐ Delete  
STREET ADDRESS 431-34TH COURT  
CITY-ST-ZIP VERO BEACH FL 32768

TITLE VD  
NAME BROWN, E. ROLLINS II ☒ Delete  
STREET ADDRESS 3333 20TH ST.  
CITY-ST-ZIP VERO BEACH FL 32960

TITLE TD  
NAME POWELL, DIXIE L. ☐ Delete  
STREET ADDRESS 1443 20TH ST.  
CITY-ST-ZIP VERO BEACH FL 32960

TITLE SD  
NAME NICOLACE, MAUREEN ☐ Delete  
STREET ADDRESS 6479 53RD CIRCLE  
CITY-ST-ZIP VERO BEACH FL 32967

TITLE D  
NAME MAZZARELLA, BART ☐ Delete  
STREET ADDRESS 6767 20TH ST.  
CITY-ST-ZIP VERO BEACH FL 32966

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VD  
NAME Adams Brian ☐ Change ☒ Addition  
STREET ADDRESS 1910 8<sup>th</sup> Avenue, Suite 205  
CITY-ST-ZIP Vero Beach, FL 32966

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

*Dixie L. Powell, Treasurer*

*2/19/06 1-772-778-8006*