

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010983

FILED
May 16, 2006
Secretary of State

Entity Name: FLORIDA SEA KAYAKING ASSOCIATION, INC.

Current Principal Place of Business:

10178 FOXCROFT ROAD WEST
JACKSONVILLE, FL 32257 US

New Principal Place of Business:

Current Mailing Address:

10178 FOXCROFT ROAD WEST
JACKSONVILLE, FL 32257 US

New Mailing Address:

FEI Number: 61-1464546 **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:

SMITH, HOWARD J
8810-C GOODBY'S EXECUTIVE DRIVE
JACKSONVILLE, FL 32217 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: D () Delete
Name: GORDON, LARRY
Address: 6863 SAN SEBASTIAN AVENUE
City-St-Zip: JACKSONVILLE, FL 32217 US

Title: D () Delete
Name: DECKER, DANA
Address: 445 TABOR DR E
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: T () Delete
Name: AERTLER, SUSAN B
Address: 10178 FOXCROFT ROAD WEST
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: D () Delete
Name: BORTZ, KATHY
Address: 2708 SHAWNEE WAY
City-St-Zip: JACKSONVILLE, FL 32259

Title: VSD () Delete
Name: DICKINSON, FRANKLIN
Address: 60 A NORTH ROSCOE BLVD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: PD () Delete
Name: BAILEY, GREG
Address: 822 CLOUD BERRY BRANCH WAY
City-St-Zip: JACKSONVILLE, FL 32259

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: SUSAN AERTKER

TREA

05/16/2006

Electronic Signature of Signing Officer or Director

Date