2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000444

Entity Name: OKALOOSA ARTS ALLIANCE, INC.

FILED Jan 24, 2006 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

310 PERRY AVENUE

FORT WALTON BEACH, FL 32548

Current Mailing Address: New Mailing Address:

P.O. BOX 4426 P.O. BOX 4426

FT. WALTON, FL 325494426 FT. WALTON BEACH, FL 325494426

FEI Number: 54-2144083 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:

LORD, PERRY D 533 POCAHONTAS DR FORT WALTON BEACH, FL 32547 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:

Title: P () Delete Title: E D (X) Change () Addition Name: LORD, PERRY D Name: LORD, PERRY D

Address: 533 POCAHONTAS DR Address: 533 POCAHAONTAS DR

City-St-Zip: FORT WALTON BEACH, FL 32547 City-St-Zip: FORT WWALTON BEACH, FL 32547

Title: () Delete Title: PRES (X) Change () Addition HURD, GORDON Name: VANDAM, TIMOTHY P Name: Address: 1107 S PALM BLVD Address: 226 WINDWARD WAY City-St-Zip: NICEVILLE, FL 32578 City-St-Zip: NICEVILLE,, FL 32578

Title: D () Delete Title: V PR (X) Change () Addition Name: VAUGHEN, SHEILA Name: KURZ, ANITA

Address: 211 GALWAY DR Address: 821 WEEDEN ISLAND DR

Address: 211 GALVWAY DR Address: 821 WEEDEN ISLAND DR
City-St-Zip: NICEVILLE, FL 325783946 City-St-Zip: NICEVILLE, FL 32578

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad (\) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf SEC} \qquad ({\sf X}) \, {\sf Change} \, (\) \, {\sf Addition}$

 Name:
 VALDES, KAREN
 Name:
 THOREEN, JAMES

 Address:
 1130 N BAYSHORE DR
 Address:
 33 ANASTASIA DR SE

 City-St-Zip:
 VALPARAISO, FL 32580
 City-St-Zip:
 FORT WALTON BEACH, FL 32548

Title: D () Delete Title: TRE (X) Change () Addition

Name: MOORES, HÀSSELL B JR. Name: EADY, MARCY A
Address: 110 POINTER LANE Address: 141 HOMEWOOD DR

City-St-Zip: CRESTVIEW, FL 325369393 City-St-Zip: FORT WALTON BEACH, FL 32548

Title: D (X) Delete Title: () Change () Addition

 Name:
 ALLEN, CAROLINE
 Name:

 Address:
 649 MCCLELLAN ST.
 Address:

 City-St-Zip:
 CRESTVIEW, FL 325363949
 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: MARCY A EADY TREA 01/24/2006

Electronic Signature of Signing Officer or Director

Date