## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000003742

FILED Jan 26, 2006 Secretary of State

Entity Name: SOUTH END NEIGHBORHOOD ASSOCIATION, INC.

| Current Principal Place of Business:                            |  |                                  |  | New Principal Place of Business:                                       |  |                |                        |
|---|--|----------------------------------|--|--|--|----------------|------------------------|
| 1400 CLARE AVE<br>WEST PALM BEACH, FL 33401                     |  |                                  | 5910 S. DIXIE HIGHWAY<br>WEST PALM BEACH, FL 33405 |  |  |                |                        |
| Current Mailing Address:  |  |                                  |  | New Mailing Address:   |  |                |                        |
| P.O. BOX 6<br>WEST PAL  | 8968<br>M BEACH, FL  | 33405                            |  |  | XIE HIGHWAY<br>_M BEACH, FL                            |                |                        |
| FEI Number:   | 20-2466308   | FEI Number Applied For ( )       | FEI Nun  | nber Not Appl  | licable()  | Certificate o  | of Status Desired ( )  |
| Name and  | Address of Cu  | ırrent Registered Agent:         |  | Name and   | Address of N   | lew Registe    | ered Agent:            |
| PORCHER, HANK<br>1400 CLARE AVE<br>WEST PALM BEACH, FL 33401 US |  |                                  |  | PORCHER, HANK<br>5910 S. DIXIE HIGHWAY<br>WEST PALM BEACH, FL 33405 US |  |                |                        |
| The above<br>in the State                                       |  | ubmits this statement for the pu | ırpose o   | f changing i   | ts registered o  | ffice or regis | stered agent, or both, |
| SIGNATUR  | RE: HANK POF   | RCHER                            |  |  |  | 01/26          | 6/2006                 |
|   | Electronic   | c Signature of Registered Ager   | nt   |  |  | Dat            | re .                   |
| OFFICERS  | AND DIRECT   | ORS:                             |  | ADDITION   | IS/CHANGES   | TO OFFICE      | ERS AND DIRECTORS      |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                     | VD () I<br>PORCHER, HAN<br>101 PALMETTO<br>WEST PALM BE    |                                  |  | Title:<br>Name:<br>Address:<br>City-St-Zip:                            | ()   | Change ( ) A   | ddition                |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                     | PD () I<br>CORSON, STEVI<br>322 COLONIAL F<br>WEST PALM BE | RD.                              |  | Title:<br>Name:<br>Address:<br>City-St-Zip:                            | PD (X)<br>MATERIO, SHA<br>339 ALHAMBRA<br>WEST PALM BI | A              |                        |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                     | D () I<br>MOORE, DON<br>242 BLOOMFIEL<br>WEST PALM BE      |                                  |  | Title:<br>Name:<br>Address:<br>City-St-Zip:                            | ()   | Change ( ) A   | ddition                |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                     | SD () I<br>MATERIO, SHAN<br>339 ALHAMBRA<br>WEST PALM BE   | PL                               |  | Title:<br>Name:<br>Address:<br>City-St-Zip:                            | ()   | Change ( ) A   | ddition                |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                     | D () [<br>PARMENTER, AN<br>424 COLONIAL<br>WEST PALM BE    |                                  |  | Title:<br>Name:<br>Address:<br>City-St-Zip:                            | ()   | Change ( ) A   | addition               |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                     | D () [<br>KOONS, CAROL<br>311 MURRAY RE<br>WEST PALM BE    | )                                |  | Title:<br>Name:<br>Address:<br>City-St-Zip:                            | ()   | Change ( ) A   | addition               |

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: HANK PORCHER MR. 01/26/2006