

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004725

FILED
Aug 25, 2006
Secretary of State

Entity Name: CORVETTES OF OKEECHOBEE LAKE, INC.

Current Principal Place of Business:

P.O. BOX 1393
OKEECHOBEE, FL 349731393

New Principal Place of Business:

POBOX 1034
OKEECHOBEE, FL 34973

Current Mailing Address:

P.O. BOX 1393
OKEECHOBEE, FL 349731393

New Mailing Address:

POBOX1034
OKEECHOBEE, FL 34973

FEI Number: 26-5636106 **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:

HEATON, MELANIE
802 SE 13TH STREET
OKEECHOBEE, FL 34974 US

Name and Address of New Registered Agent:

BAILEY, DEBBY
POBOX 1034
OKEECHOBEE, FL 34973 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: DEBBY BAILEY

08/25/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HEATON, MELANIE
Address: 802 SE 13TH STREET
City-St-Zip: OKEECHOBEE, FL 34974

Title: S () Delete
Name: BALLO, LYNN
Address: 1718 SE 24TH ST
City-St-Zip: OKEECHOBEE, FL 34974

Title: T () Delete
Name: BAILEY, DEBBY
Address: 2906 SE 26TH STREET
City-St-Zip: OKEECHOBEE, FL 34974

Title: D () Delete
Name: SWAN, BILL
Address: 1140 NE 342ND TRAIL
City-St-Zip: OKEECHOBEE, FL 34972

Title: VP (X) Delete
Name: SWAN, SHIRLEY
Address: 1140 NE 342ND TRAIL
City-St-Zip: OKEECHOBEE, FL 34972

Title: D (X) Delete
Name: HOKREIN, MARILYN
Address: 3708 NE 23RD AVENUE
City-St-Zip: OKEECHOBEE, FL 34972

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BAILEY, DEBBY
Address: POBOX 1034
City-St-Zip: OKEECHOBEE, FL 34973

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

Title: T (X) Change () Addition
Name: BURROUGH, MARTHA
Address: POBOX 1034
City-St-Zip: OKEECHOBEE, FL 34973

Title: VP (X) Change () Addition
Name: WYMER, GLORIA
Address: POBOX 1034
City-St-Zip: OKEECHOBEE, FL 34973

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: DEBBY BAILEY

P

08/25/2006

Electronic Signature of Signing Officer or Director

Date