2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 10, 2006
Secretary of State

DOCUMENT# N04000006205

Entity Name: ENVIRONMENTAL COUNCIL OF VOLUSIA AND FLAGLER COUNTIES, INC.

Current Principal Place of Business:

710 CAVEDO STREET
NEW SMYRNA BEACH, FL 32168 US

New Principal Place of Business:

Current Mailing Address:

710 CAVEDO STREET
NEW SMYRNA BEACH, FL 32168 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:

WILLIAMS, PATRICIA J
710 CAVEDO STREET
NEW SMYRNA BEACH, FL 32168 US

Name and Address of New Registered Agent:

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: P ( ) Delete
Name: STRAUB, GWEN
Address: 710 CAVEDO STREET
City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

Title: VP ( ) Delete
Name: BAKER, JOHN
Address: 710 CAVEDO STREET
City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

Title: SEC ( ) Delete
Name: NEWTON, BRYNN
Address: 710 CAVEDO STREET
City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

Title: TREA ( ) Delete
Name: WILLIAMS, PATRICIA J
Address: 710 CAVEDO STREET
City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

Title: D ( ) Delete
Name: O'LOUGHLIN, BETTY
Address: 710 CAVEDO STREET
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: D ( ) Delete
Name: MOEN, MICHELE
Address: 710 CAVEDO STREET
City-St-Zip: NEW SMYRNA BEACH, FL 32168

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: O'LAUGHLIN, ELIZABETH
Address: 710 CAVEDO STREET
City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

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: BRYNN NEWTON SEC 05/10/2006
Electronic Signature of Signing Officer or Director — Date