

NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 03, 2006 8:00 am
Secretary of State

05-03-2006 90203 001 ****61.25

DOCUMENT # N04000007223

1. Entity Name

SAVE OUR CANALS, INC.



Principal Place of Business

**8703 COBBLESTONE DR
TAMPA FL 33615**

Mailing Address

**8703 COBBLESTONE DR
TAMPA FL 33615**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

20-1403664

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MARTIN, BONNIE, M
5425 THERESA RD #A
TAMPA FL 33615**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	GARRY, BRIAN	
STREET ADDRESS	8703 COBBLESTONE DR	
CITY-ST-ZIP	TAMPA FL 33615	
TITLE	V	<input type="checkbox"/> Delete
NAME	WETZEL, NORMAN	
STREET ADDRESS	8451 FLAGSTONE DR	
CITY-ST-ZIP	TAMPA FL 33615	
TITLE	T	<input type="checkbox"/> Delete
NAME	PEEL, LYNETTE	
STREET ADDRESS	4621 BAY CREST DR	
CITY-ST-ZIP	TAMPA FL 33615	
TITLE	D	<input type="checkbox"/> Delete
NAME	DUCKHARDT, BILL	
STREET ADDRESS	3942 DORAL DRIVE	
CITY-ST-ZIP	TAMPA FL 33634	
TITLE	D	<input type="checkbox"/> Delete
NAME	SMITH, TERRY	
STREET ADDRESS	4310 SUNRAY CT	
CITY-ST-ZIP	TAMPA FL 33615	
TITLE	D	<input type="checkbox"/> Delete
NAME	MARTIN, GEORGE	
STREET ADDRESS	3901 E EDEN ROC CIRCLE	
CITY-ST-ZIP	TAMPA FL 33634	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Bruno Schmidt	
STREET ADDRESS	5836 Portsmouth Dr	
CITY-ST-ZIP	Tampa, FL 33615	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jeremy Harenza	
STREET ADDRESS	9806 Mako Ct	
CITY-ST-ZIP	Tampa, FL 33615	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Kim Henderson	
STREET ADDRESS	9806 Mako Ct	
CITY-ST-ZIP	Tampa, FL 33615	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

4/24/06

ATTACHMENT

40080850

NO40000007223

Additions for 2006 annual report:

D

Bruno Schmidt
5836 Portsmouth Dr
Tampa, FL 33615

OK/BAC

D

Jeremy Harenza
9806 Mako Ct.
Tampa, FL 33615

OK/BAL

D

Kim Henderson
9806 Mako Ct.
Tampa, FL 33615

OK/B7