

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007683

FILED
May 25, 2007
Secretary of State

Entity Name: PUTNAM COUNTY ANTI-DRUG COALITON, INC.

Current Principal Place of Business:

613 ST JOHNS AVE
STE 210
PALATKA, FL 32177

New Principal Place of Business:

Current Mailing Address:

613 ST JOHNS AVE
STE 210
PALATKA, FL 32177

New Mailing Address:

FEI Number: 03-0547108 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

CARROW, SELMA
613 ST JOHNS AVE
STE 210
PALATKA, FL 32177 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: TRANDLER, JACK
Address: 319 KIRKLAND ST
City-St-Zip: PALATKA, FL 32177

Title: V () Delete
Name: CHAMPAGNIE, DIETRICH
Address: 142 FERRY ROAD
City-St-Zip: EAST PALATKA, FL 32131

Title: S () Delete
Name: BEUTTIEN, ALICE
Address: 142 FERRY ROAD
City-St-Zip: EAST PALATKA, FL 32131

Title: T () Delete
Name: CARROW, SELMA
Address: 310 S PALM AVE STE 12
City-St-Zip: PALATKA, FL 32177

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DJATAR, ZION
Address: 700 MAIN STREET
City-St-Zip: PALATKA, FL 32177 US

Title: V (X) Change () Addition
Name: BATTS, MARY
Address: 613 ST. JOHNS AVENUE, SUITE 210
City-St-Zip: PALATKA, FL 32177 US

Title: S (X) Change () Addition
Name: GARCIA, LUZ
Address: 320 KAY LARKIN DRIVE
City-St-Zip: PALATKA, FL 32177 US

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

Title: D () Change (X) Addition
Name: TOWNSEND, TOM
Address: 605 NORTH 3RD STREET
City-St-Zip: PALATKA, FL 32177 US

Title: D () Change (X) Addition
Name: HUTCHENS, HARRY
Address: 1800 HWY 19 NORTH
City-St-Zip: PALATKA, FL 32177

I hereby certify that the information supplied with this filing does not qualify 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: ZION DJATAR

P

05/25/2007

Electronic Signature of Signing Officer or Director

Date