## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **FILED** Apr 12, 2006 8:00 am Secretary of State 04-12-2006 90074 026 \*\*\*\*61.25

1. Entity Name FLORIDA FOUNDATION VOLUNTEER SERTOMA CLUB, INC.									~ • C T	25			
Principal Place of Business 4443 ROWAN RD NEW PORT RICHEY, FL 34653		Mailing Address 4443 ROWAN RD NEW PORT RICHEY, FL 34653 .			•		40046725						
2. Principal Place of Business			3. Mailing Address										
Suite, Apt. #, etc.			Suite, Apt. #, etc.					01052006	Chg-Ni		==(=) ((2))	037 (11/05	
City & State			City & State					4. FEI Numb	er			`	Applied For
Zip Country		Zip Cou			untry	5. Certificate of Status Desired \$8.75 Addition							
	6 Name	and Address of Current	Pagistared	Agent		1						Fee Requi	red
	o. Haine	and Address of Current	Registered	Agent		Name		7. Name and	Address	OI NEW N	cegistered	Agent	
HOWARD, BONNIE J 4443 ROWAN RD NEW PORT RICHEY, FL 34653						Street Address (P.O. Box Number is Not Acceptable)							
NEW POR	RICHEY	7, FL 34653							-				
						City					F	Zip Co	ode
8. The above the obligati	named entity ions of regist	y submits this statement for ered agent.	or the purpos	e of changing its	register	ed office or	register	ed agent, or bo	oth, in the S	tate of Flo	orida. Lar	n familiar wit	h, and accept
SIGNATURE .	Streeture hand	or printed name of registered agen											
	oillinging, thac	or bixired traces of refreshed after	I and the g appace	able. (NOTS	E: Registere	ed Agent signati	ura required	when reinstating)			DATE		
-			and title if applica				ura required					,	
{	Filing Fe	e is \$61.25 lay 1, 2006	t and title it appace	9. Election Can Trust Fund C	npaign F	Financing	ure required	\$5.00 May I Added to Fees	Be		lake che	ck payable artment of	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Mary Low McCart Mary Low McCart