2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2006 8:00 am
Secretary of State
03-28-2006 90122 029 ****61.25

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1. Entity Name
VETERAN'S COMMUNITY EDUCATION PARTNERSHIP FOR WEST VOLUSIA, INCORPORATED

Principal Place of Business	Mailing Address
C/O MARION L. COTTEN 2072 ALAMEDA DRIVE DELTONA, FL 32738-4874	C/O MARION L. COTTEN 2072 ALAMEDA DRIVE DELTONA, FL 32738-4874

03222006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 56-521215 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DE LA SIERRA, ANGELL O 2336 INDIA BOULEVARD DELTONA, FL 32738	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C COTTEN, MARION L 2072 ALAMEDA DRIVE DELTONA, FL 327384874	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VC HICKEY, WILLIAM T 2289 HOWLAND BOULEVARD DELTONA, FL 32738	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S RAINS, TERRY 6184 CHAMBERLAIN STREET DELTONA, FL 32738	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S WILLIAM P. O'HARA 1760 S TANNER CT DELTONA FL 32738-8519 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T GAFFNEY, THOMAS 624 VESPERS WAY ORANGE CITY, FL 32763	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T GERTRUDE J. WHITE 2066 W. BARLINGTON DR DELTONA FL 32725 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: Marion L. Cotten 3/22/06 386-789-0340
SIGNATURE AND TYPED OR PRINTED NAME OF EXISTING OFFICER OR DIRECTOR — Date — Daytime Phone #