
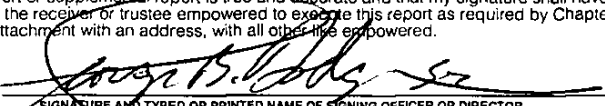


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2007 8:00 am
Secretary of State

05-21-2007 90058 001 ****78.75

DOCUMENT # N05000005354			
1. Entity Name FIRST NATIONS INTERTRIBAL ASSOCIATION, INC.			
Principal Place of Business 615 EAST DITMAR STREET PENSACOLA, FL 32503		Mailing Address 615 EAST DITMAR STREET PENSACOLA, FL 32503	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
DODGE, GEORGE B SR 615 EAST DITMAR STREET PENSACOLA, FL 32503		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$61.25 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	PD DODGE, GEORGE B SR 615 EAST DITMAR STREET PENSACOLA, FL 32503 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MALICOAT, DAVID 6483 BERRYHILL ROAD MILTON, FL 32570 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR HARMON, JAMES A 3610 CHERRY LAUREL DRIVE PENSACOLA, FL 32504 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HAMILTON, LACEY J 116 SOUTH 2ND STREET PENSACOLA, FL 32507 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DETENNE, MARLENE 1280 MAHOGANY MILL ROAD PENSACOLA, FL 32507 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCCARTAN, MICHAEL 1221 E. MORINO STREET PENSACOLA, FL 32503 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: 		14 May '07 Date _____ Daytime Phone # _____	

ATTACHMENT

40117250

Division of Corporations**Annual Report**

Please review the filing for accuracy and the fee to file. If you need to make corrections, use your browser 'BACK' button, make the necessary changes and use the 'CONTINUE' button again. The filing information will be updated exactly as you have entered it. Once you have submitted the information, your filing cannot be updated, removed cancelled or refunded.

Document Number

N05000005354

Business Entity NameFIRST NATIONS INTERTRIBAL
ASSOCIATION, INC.**FEI Number****FEI Number Status**

Not Applicable

Certificate of Status Desired

Yes

**Election Campaign Financing Trust Fund
Contribution**

No

Principal Place of Business**Address** 615 EAST DITMAR STREET**Suite, Apt. #, etc.****City, State** PENSACOLA, FL**Zip Code & Country** 32503**Mailing Address****Address** 615 EAST DITMAR STREET**Suite, Apt. #, etc.****City, State** PENSACOLA, FL**Zip Code & Country** 32503**Name and Address of Registered Agent****Name (Last, First, Middle, Title)** DODGE, GEORGE , B, SR**Address** 615 EAST DITMAR STREET**Suite, Apt. #, etc.****City, State** PENSACOLA, FL**Zip Code & Country** 32503 US**Registered Agent Signature****Officer/Director Name and Address****Title** PD**Name (Last, First, Middle, Title)** DODGE, GEORGE , B, SR**Street Address** 615 EAST DITMAR STREET

ATTACHMENT 40117250

City, State
Zip Code & Country

PENSACOLA, FL
32503

Title
Name (Last, First, Middle, Title)
Street Address
City, State
Zip Code & Country

VD
MALICOAT, DAVID
6483 BERRYHILL ROAD
MILTON, FL
32570

Title
Name (Last, First, Middle, Title)
Street Address
City, State
Zip Code & Country

TR
HARMON, JAMES , A
3610 CHERRY LAUREL DRIVE
PENSACOLA, FL
32504

Title
Name (Last, First, Middle, Title)
Street Address
City, State
Zip Code & Country

SD
HAMILTON, LACEY , J
116 SOUTH 2ND STREET
PENSACOLA, FL
32507

Title
Name (Last, First, Middle, Title)
Street Address
City, State
Zip Code & Country

D
DETIENNE, MARLENE
1280 MAHOGANY MILL ROAD
PENSACOLA, FL
32507

Title
Name (Last, First, Middle, Title)
Street Address
City, State
Zip Code & Country

D
MCCARTAN, MICHAEL
1221 E. MORINO STREET
PENSACOLA, FL
32503

Title PD

Officer/Director Signature GEORGE B. DODGE, SR.

Continue

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