

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006581

FILED
Apr 07, 2006
Secretary of State

Entity Name: CENTRAL FLORIDA CALLERS ASSOCIATION, INC.

Current Principal Place of Business:

2549 S. MARSHALL AVE.
SANFORD, FL 32773

New Principal Place of Business:

2549 S. MARSHALL AVE.
SANFORD, FL 32773 US

Current Mailing Address:

2549 S. MARSHALL AVE.
SANFORD, FL 32773

New Mailing Address:

2549 S. MARSHALL AVE.
SANFORD, FL 32773 US

FEI Number: 20-3163730

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROAN, RONALD L
2549 S. MARSHALL AVE.
SANFORD, FL 32773 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: PACKER, SUSANELAINE
Address: 740 S. HAMPTON
City-St-Zip: ORLANDO, FL 32803

Title: SEC () Delete
Name: HANHURST, DONALD
Address: 17411 SE 112TH CT
City-St-Zip: SUMMERFIELD, FL 34491

Title: TRES () Delete
Name: ROAN, ANN
Address: 2549 S. MARSHALL AVE
City-St-Zip: SANFORD, FL 32773

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ANN ROAN

TRES

04/07/2006

Electronic Signature of Signing Officer or Director

Date