

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007093

FILED
Feb 24, 2007
Secretary of State

Entity Name: ASSOCIATION FOR BAYOU CONSERVATION, INC.

Current Principal Place of Business:

912 WOODBRIAR CT
FT WALTON BEACH, FL 32547

New Principal Place of Business:

Current Mailing Address:

912 WOODBRIAR CT
FT WALTON BEACH, FL 32547

New Mailing Address:

FEI Number: 74-3148924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOVETT, JOHN C
106 E COLLEGE AVE
SUITE 1200
TALLAHASSEE, FL 32301 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: T () Delete
Name: FRASER, DIANE
Address: 411 EASTVIEW DR
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: D () Delete
Name: JANNAZO, JOHN D
Address: 912 WOODBRIAR CT
City-St-Zip: FT WALTON BEACH, FL 32547

Title: D () Delete
Name: DARNELL, J. CLOYCE
Address: 1 LONGWOOD DR
City-St-Zip: SHALIMAR, FL 32579

Title: D () Delete
Name: CULLITON, JIM
Address: 163 ELDRIDGE RD
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: D () Delete
Name: WALTER, WILLIAM
Address: 425 EASTVIEW DR
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: D () Delete
Name: CARTER, RAYMOND
Address: 945 FOREST AVE
City-St-Zip: FORT WALTON BEACH, FL 32547

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:

Title: () Change () Addition
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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: RAYMOND CARTER

D

02/24/2007

Electronic Signature of Signing Officer or Director

Date