

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007825

FILED  
Apr 07, 2006  
Secretary of State

**Entity Name:** PASCO COUNTY ANTI-DRUG COALITION, INC.

**Current Principal Place of Business:**

7809 MASSACHUSETTS AVE  
NEW PORT RICHEY, FL 34653

**New Principal Place of Business:**

**Current Mailing Address:**

7809 MASSACHUSETTS AVE  
NEW PORT RICHEY, FL 34653

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TORRENCE, JR, ALFRED W  
6645 RIDGE ROAD  
PORT RICHEY, FL 34668 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD ( ) Change (X) Addition  
Name: CROSBY, MARIA  
Address: 15506 COUNTY LINE ROAD, SUITE 103  
City-St-Zip: SPRING HILL, FL 34610

Title: TR ( ) Change (X) Addition  
Name: GILL, DENISE  
Address: 15506 CONNTY LINE ROAD, SUITE 103  
City-St-Zip: SPRING HILL, FL 34610

Title: VPD ( ) Change (X) Addition  
Name: HAMMOND, LISA  
Address: 15506 COUNTY LINE ROAD, SUITE 103  
City-St-Zip: SPRING HILL, FL 34610

Title: SC ( ) Change (X) Addition  
Name: FOY, LINDA  
Address: 15506 COUNTY LINE ROAD, SUITE 103  
City-St-Zip: SPRING HILL, FL 34610

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: LINDA FOY

SC

04/07/2006

Electronic Signature of Signing Officer or Director

Date