

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001790

FILED
Apr 30, 2008
Secretary of State

Entity Name: TROOP 413 ASSOCIATION, INC.

Current Principal Place of Business:

2080 WEST GRANADA BLVD
ORMOND BEACH, FL 321742531

New Principal Place of Business:

Current Mailing Address:

PO BOX 73016
ORMOND BEACH, FL 321730612

New Mailing Address:

FEI Number: 45-0553891

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASE, DAVID R
7 WINDSOR DRIVE
ORMOND BEACH, FL 321743853 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: DC () Delete
Name: LANG, WILLIAM G
Address: 1077 WEXFORD WAY
City-St-Zip: PORT ORANGE, FL 321294107

Title: DV () Delete
Name: CASE, DAVID R
Address: 7 WINDSORE DRIVE
City-St-Zip: ORMOND BEACH, FL 321743853

Title: D () Delete
Name: JOHNSTON, ANDY
Address: 177 PINE WOODS ROAD
City-St-Zip: ORMOND BEACH, FL 321748040

Title: S () Delete
Name: LANG, LINDA
Address: 2080 WEST GRANADA BLVD
City-St-Zip: ORMOND BEACH, FL 321742531

Title: T () Delete
Name: BOST, JUSTIN
Address: 2080 WEST GRANADA BLVD
City-St-Zip: ORMOND BEACH, FL 321742531

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
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DAVID R. CASE

DV

04/30/2008

Electronic Signature of Signing Officer or Director

Date