

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90479 046 ****61.25

DOCUMENT # N08750 1. Entity Name R/C WORLD COMMUNITY ASSOCIATION, INC.	
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Principal Place of Business
C/O HARA MANAGEMENT, INC.
118 N. WYMORE RD.
WINTER PARK, FL 32789

Mailing Address
C/O HARA MANAGEMENT, INC.
118 N. WYMORE RD.
WINTER PARK, FL 32789

30017703



04142006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2571463	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
HARA, ROBERT HARA MANAGEMENT, INC. 118 N. WYMORE RD. WINTER PARK, FL 32789		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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

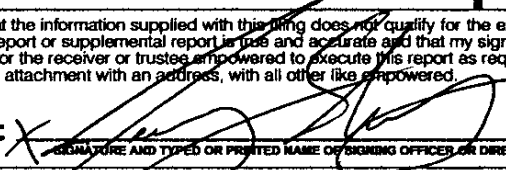
**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$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	SD ALMODVAR, MARLEN 10016 MARGUEX DR ORLANDO, FL 32825 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Thomas Moreno 10075 Marguex Drive Orlando FL 32825 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD SHORT, JEREMY 10067 MARGUEX DR ORLANDO, FL 32825 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Jeremy Short 10067 Marguex Drive Orlando FL 32825 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORENO, THOMAS 10075 MARGUEX DR ORLANDO, FL 32825 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Ray Weismann 1406 Julie Drive Orlando FL 32825 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MIRANDA, JOANNE 10110 MARGUEX DR ORLANDO, FL 32825 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Jackie Hopkins 10039 Marguex Dr Orlando FL 32825 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SUAREZ, EMILIO 10031 MARGUEX DR ORLANDO, FL 32825 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Harold Betteridge 10012 Trillium Drive Orlando FL 32825 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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:  **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR** **Date** 4-25-06 **Daytime Phone #**