

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Mar 17, 2006 8:00 am
Secretary of State

02-21-2006 90023 050 ****61.25

DOCUMENT # N10237 1. Entity Name THE GERMAN-AMERICAN CLUB GERMANIA, INC.					
Principal Place of Business P O BOX 323 FT WALTON BCH FL 32549 US		Mailing Address P O BOX 323 FT WALTON BCH FL 32549 US			
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip		City & State Zip		4. FEI Number 26-3398724 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Country		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BEHNKEN, JOHANN MR 111 CLIFFORD DR. SHALIMAR FL 32579			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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.					
<div style="display: flex; justify-content: space-between;"> <div> SIGNATURE <u>JOHANN H. BEHNKEN</u> <small>Signature, typed or printed name of registered agent (not applicable)</small> </div> <div>  <small>(NOTE: Registered Agent signature required when reappointing)</small> </div> <div> <u>9 FEB 06</u> <small>DATE</small> </div> </div>					
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 <u>PD</u> NAME BEHNKEN, JOHANN H STREET ADDRESS 111 CLIFFORD DR CITY- ST- ZIP SHALIMAR FL 32570	<input checked="" type="checkbox"/> Delete		TITLE JIM ZILER NAME 52 MANDEVILLA LANE STREET ADDRESS DESTIN FL 32541 CITY- ST- ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <u>VP</u> NAME DUHAIME, HEIDI STREET ADDRESS 210 WINDWARD WAY CITY- ST- ZIP NICEVILLE FL 32578	<input checked="" type="checkbox"/> Delete		TITLE ERIKA CAMPBELL NAME 1592 PARKVIEW COURT STREET ADDRESS NICEVILLE FL 32578 CITY- ST- ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <u>SD</u> NAME FRAZIER, MARGOT STREET ADDRESS 2007 MISTRAL LANE CITY- ST- ZIP FORT WALTON BEACH FL 32547	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE <u>TD</u> NAME LAVBISCH, WOLFGANG STREET ADDRESS 2666 BOB WHITE CIR CITY- ST- ZIP NAVARRE FL 32566	<input checked="" type="checkbox"/> Delete <u>LAURISCH BOB WHITE CIR</u>		TITLE CORRECTION NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 <u>JAMES ZILER</u> JAMES ZILER <u>3-14-06</u> <u>(810) 269-3370</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					



ATTACHMENT

66005814

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 22, 2006

THE GERMAN-AMERICAN CLUB GERMANIA, INC.
P O BOX 323
FT WALTON BCH, FL 32549 US

Subject: THE GERMAN-AMERICAN CLUB GERMANIA, INC.

Reference Number: N10237

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$61.25; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/rm

ANNUAL REPORTS SECTION