

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15373

FILED  
Mar 24, 2006  
Secretary of State

Entity Name: TIGER TOUCHDOWN CLUB, INC.

## Current Principal Place of Business:

2801 S. KANNER HWY  
STUART, FL 34994 US

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 2159  
STUART, FL 34995 US

## New Mailing Address:

FEI Number: 65-0075611

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRITTON, JAMES T MR  
477 SW RIVERWAY BLVD  
PALM CITY, FL 34990 US

## Name and Address of New Registered Agent:

BALTES, MARY L TRES  
3624 SW SUNSET TRACE CIRCLE  
PALM CITY, FL 34990 US

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: MARY L. BALTES

03/24/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BRITTON, JAMES T  
Address: 477 SW RIVERWAY BLVD  
City-St-Zip: PALM CITY, FL 34990 US

Title: SEC ( ) Delete  
Name: BRITTON, SHERYL H  
Address: 477 SW RIVERWAY BLVD  
City-St-Zip: PALM CITY, FL 34990 US

Title: TRES ( ) Delete  
Name: BALTES, MARY  
Address: 3624 SW SUNSET TRACE  
City-St-Zip: PALM CITY, FL 34990 US

Title: VP ( ) Delete  
Name: KNEPPER, MICHAEL  
Address: 3517 SW THISTLEWOOD LANE  
City-St-Zip: PALM CITY, FL 34990 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: KNEPPER, MIKE  
Address: 3517 SW THISTLEWOOD LANE  
City-St-Zip: PALM CITY, FL 34990 US

Title: SEC (X) Change ( ) Addition  
Name: KNEPPER, RITA  
Address: 3517 SW THISTLEWOOD LANE  
City-St-Zip: PALM CITY, FL 34990 US

Title: TRES (X) Change ( ) Addition  
Name: BALTES, MARY L  
Address: 3624 SW SUNSET TRACE CIRCLE  
City-St-Zip: PALM CITY, FL 34990 US

Title: VP (X) Change ( ) Addition  
Name: CORRIGAN, DAVID  
Address: 5485 SW ORCHID DRIVE  
City-St-Zip: PALM CITY, FL 34990 US

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: MARY L. BALTES

TRES

03/24/2006

Electronic Signature of Signing Officer or Director

Date