

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

FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90313 004 ****61.25

DOCUMENT # N15870

1. Entity Name

**TITUSVILLE SECTION FIVE PROTECTIVE
ASSOCIATION, INC.**



Principal Place of Business

2208 HERITAGE DR.
TITUSVILLE FL 32780

Mailing Address

2208 HERITAGE DR.
TITUSVILLE FL 32780

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

59-2144104

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WHITE, DORIS G
2208 HERITAGE DRIVE
TITUSVILLE FL 32780**

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

**FILE NOW: 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

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	WISE, PAUL	
STREET ADDRESS	2200 HERITAGE DR	
CITY-ST-ZIP	TITUSVILLE FL 32780	

TITLE	D	<input type="checkbox"/> Delete
NAME	WILLIAM, BROWN N	
STREET ADDRESS	2188 HERTIAGE DR.	
CITY-ST-ZIP	TITUSVILLE FL 32780	

TITLE	P	<input type="checkbox"/> Delete
NAME	PATHEL, EUGENE	
STREET ADDRESS	2210 HERITAGE DR	
CITY-ST-ZIP	TITUSVILLE FL 32780	

TITLE	ST	<input type="checkbox"/> Delete
NAME	WHITE, DORIS G	
STREET ADDRESS	2208 HERITAGE DR.	
CITY-ST-ZIP	TITUSVILLE FL 32780	

TITLE	D	<input type="checkbox"/> Delete
NAME	BUCHANAN, PATTI	
STREET ADDRESS	2216 HERTIAGE DR.	
CITY-ST-ZIP	TITUSVILLE FL 32780	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JANELLE, Arthur	
STREET ADDRESS	2212 Heritage Dr	
CITY-ST-ZIP	Titusville, FL 32780	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	O'HARA, Al	
STREET ADDRESS	2202 Heritage Dr	
CITY-ST-ZIP	Titusville, FL 32780	

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:

Arthur Janelle

04/03/2006 (321) 544-0108