2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2006 8:00 am
Secretary of State
04-14-2006 90141 050 ****61.25

DOCUMENT # N17101

1. Entity Name
FLORIDA ROMANCE WRITERS, INC.

Principal Place of Business	Mailing Address
1620 S TREASURE DR NORTH BAY VILLAGE, FL 33141 US	1620 S TREASURE DR NORTH BAY VILLAGE, FL 33141 US

02012006 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 76-02377716 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HARTLEY, SHARON
1620 S TREASURE DR
NORTH BAY VILLAGE, FL 33141

7. Name and Address of New Registered Agent

Name Lyn Armstrong
Street Address (P.O. Box Number is Not Acceptable) 13740 Cumberland Place
City Davie FL Zip Code 33325

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 Sharon Hartley 4/8/06
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	P BUSTOS, ONA 11155 NW 26 PL FORT LAUDERDALE, FL 33322	☑ Delete	TRACI HALL 210 Park Place Jupiter FL 33458	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HARTLEY, SHARON 1620 S TREASURE DR NORTH BAY VILLAGE, FL 33141	☑ Delete	TD LYN ARMSTRONG 13740 Cumberland Place Davie FL 33325	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP HALL, TRACI 141 MAPLECREST CIR JUPITER, FL 33458	☐ Delete	VP LISA MANUEL 10231 N.W 43 St Coral Springs FL 33065	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/D WASHBURN, JAN 1693 SW 19 ST FORT LAUDERDALE, FL 33317	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PEEK, SUSAN 1217 AVOCADO ISLE FORT LAUDERDALE, FL 33315	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ 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: Lyn Armstrong 4.8.06 954 649 2558
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #