## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19177

FRIENDS OF FT TAYLOR INC.

FILED May 26, 2006 Secretary of State

Entity Nar	THE: FRIENDS OF FT. TAYLOR, INC.			
Current Principal Place of Business:		New Princ	cipal Place of Business:	
P. O. BOX				
KEY WES	T, FL 33041			
Current Mailing Address:		New Maili	New Mailing Address:	
P.O.BOX	LOR, SOUTHARD ST. ON TRUMAN ANX. 58 T, FL 33041			
In accordance	ce with s. 607.193(2)(b), F.S., the corporation did not receiv	•	ce.	
Name and	Address of Current Registered Agent:	Name and	Address of New Registered Agent:	
#110	, PAUL NT STREET T, FL 33040 US			
	named entity submits this statement for the purpose of Florida.	e of changing i	its registered office or registered agent, or both,	
SIGNATUR	RE:			
	Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P ( ) Delete GOUBAITIS, RICHARD 912 TRUMAN AVE. KEY WEST, FL 33040	Title: Name: Address: City-St-Zip:	P (X) Change ( ) Addition DEDEO, DANIEL 4A CALLE DOS KEY WEST, FL 33040	
Title: Name: Address: City-St-Zip:	VP ( ) Delete ROUMM, DAVID 1626 SIRUGO AVE. KEY WEST, FL 33040	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition BURNS, DAVID 417 EATON STREET KEY WEST, FL 33040	
Title: Name: Address: City-St-Zip:	T () Delete BURLEY, DANIEL T 1400 DUVAL ST. KEY WEST, FL 33040	Title: Name: Address: City-St-Zip:	T (X) Change ( ) Addition GRAZ, TIMOTHY F 3354 RIVIERA DRIVE KEY WEST, FL 33040	
Title: Name: Address: City-St-Zip:	S () Delete THOMAS, JACK 33045 KEY WEST, FL 33040	Title: Name: Address: City-St-Zip:	S (X) Change ( ) Addition EFSTRATIOU, DMITRI 1114 17TH TERRACE KEY WEST, FL 33040	
Title: Name: Address: City-St-Zip:	T () Delete WILLIAMS, PAUL 6810 FRONT ST. KEY WEST, FL 33040	Title: Name: Address: Citv-St-Zip:	( ) Change ( ) Addition	

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: PAUL WILLIAMS DIR 05/26/2006