

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21988

FILED
Feb 03, 2007
Secretary of State

Entity Name: TRI-COUNTY FLORIDA, CHAPTER #317, INC.

Current Principal Place of Business:

2557 SW HINCHMAN ST.
PORT SAINT LUCIE, FL 34984 US

New Principal Place of Business:

2224 5TH COURT SE
VERO BEACH, FL 32962 US

Current Mailing Address:

2557 SW HINCHMAN ST.
PORT SAINT LUCIE, FL 34984 US

New Mailing Address:

2224 5TH COURT SE
VERO BEACH, FL 32962 US

FEI Number: 59-2748620

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DENTI, CATHY
2557 SW HINCHMAN ST.
PORT SAINT LUCIE, FL 34984 US

Name and Address of New Registered Agent:

WOOD, ANN
2224 5TH COURT SE
VERO BEACH, FL 32962 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: ANN B. WOOD

02/03/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BUSTIN, BEVERLY
Address: 115 NE BEACH CT.
City-St-Zip: PORT SAINT LUCIE, FL 34952 US

Title: VPD () Delete
Name: ENGLISH, CHRISTINE
Address: 3216 IROQUOIS AVE
City-St-Zip: FORT PIERCE, FL 34946

Title: SD () Delete
Name: JODY, SENG
Address: 8365 10TH AVE.
City-St-Zip: VERO BEACH, FL 32967

Title: TD () Delete
Name: DENTI, CATHY
Address: 2557 SW HINCHMAN ST.
City-St-Zip: PORT SAINT LUCIE, FL 34984

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: WOOD, ANN
Address: 2224 5TH COURT SE
City-St-Zip: VERO BEACH, FL 32962 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: ANN B. WOOD

T/D

02/03/2007

Electronic Signature of Signing Officer or Director

Date