

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24010

FILED  
Mar 26, 2007  
Secretary of State

Entity Name: APCO INSTITUTE, INC.

## Current Principal Place of Business:

351 N. WILLIAMSON BLVD  
DAYTONA BEACH, FL 32114

## New Principal Place of Business:

## Current Mailing Address:

351 N. WILLIAMSON BLVD  
DAYTONA BEACH, FL 32114

## New Mailing Address:

FEI Number: 59-2895017

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RYAN, E TIM  
351 N. WILLIAMSON BLVD  
DAYTONA BEACH, FL 32114 US

## Name and Address of New Registered Agent:

PALMETTO CHARTER SERVICES, INC.  
150 MAGNOLIA AVENUE  
DAYTONA BEACH, FL 32114 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: JOHN FERGUSON, VICE PRESIDENT  
Electronic Signature of Registered Agent

03/26/2007

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MCCARLEY, WANDA S  
Address: 351 N. WILLIAMSON BLVD  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D ( ) Delete  
Name: CARTER, WILLIS S  
Address: 351 N WILLIAMSON BLVD  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D ( ) Delete  
Name: FISCHER, CHRIS  
Address: 351 N WILLIAMS BLVD  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D ( ) Delete  
Name: MIRGON, RICHARD S  
Address: 351 N WILLIAMSON BLVD  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: DP ( ) Delete  
Name: RICE JR, GEORGE B  
Address: 351 N WILLIAMSON BLVD  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: DS (X) Delete  
Name: RYAN, E. TIM  
Address: 351 N WILLIAMSON BLVD  
City-St-Zip: DAYTONA BEACH, FL 32114

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

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

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

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: WANDA MCCARLEY  
Electronic Signature of Signing Officer or Director

P

03/26/2007

Date