


**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 09, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # N28480  
1. Entity Name  
THE VENERABLE ORDER OF KNIGHTS OF MICHAEL  
THE ARCHANGEL, INC.



Principal Place of Business      Mailing Address  
6350 HORIZON DR.                      6350 HORIZON DR.  
TITUSVILLE, FL 32780              TITUSVILLE, FL 32780

**DO NOT WRITE IN THIS SPACE**



02012006 No Chg-NP      CR2E037 (11/05)

4. FEI Number      Applied For  
59-2598998              Not Applicable

5. Certificate of Status Desired       \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
  
CHITWOOD, DEBRA K  
6350 HORIZON DR.  
TITUSVILLE, FL 32780

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution.       \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SHEPHERD, DONNA 6350 HORIZON DR. TITUSVILLE, FL 32780
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD CHITWOOD, DEBBIE 6350 HORIZON DR. TITUSVILLE, FL 32780
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03/20/06-80028-025 61.25

**DO NOT WRITE  
IN THIS SPACE**

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: Debra K. Chitwood      3-6-06      321-264-0911  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #