2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32677

FILED Jan 25, 2006 Secretary of State

Entity Name: FLORIDA PARK SERVICE ALUMNI ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

558 S W MAXWELL COURT FORT WHITE, FL 32038 US

Current Mailing Address: New Mailing Address:

558 S W MAXWELL COURT FORT WHITE, FL 32038 US

FEI Number: 59-3120552 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MAXWELL, JUDITH 558 S W MAXWELL COURT FORT WHITE, FL 32038 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:

Flatoria Circular of Decides of Asset

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:DP () DeleteTitle:D (X) Change () AdditionName:COOK, SANDYName:APTHORP, GEORGEAddress:460 WAKULLA PARK DRIVEAddress:460 WAKULLA PARK DRIVECity-St-Zip:WAKULLA SPRINGS, FL 32327City-St-Zip:WAKULLA SPRINGS, FL 32327

Title: D () Delete Title: DP (X) Change () Addition Name: DOMROSKI, RICHARD Name: LANDRUM, NEY

Address: 2629 ROYAL PALM DR Address: 126 MILL BRANCH ROAD
City-St-Zip: EDGEWATER, FL 32142 City-St-Zip: TALLAHASSEE, FL 32312 US

Title: DS () Delete Title: () Change () Addition

 Name:
 MAXWELL, JUDITH A
 Name:

 Address:
 558 SW MAXWELL COURT
 Address:

 City-St-Zip:
 FORT WHITE, FL 32038
 City-St-Zip:

Title: DT () Delete Title: DT (X) Change () Addition

 Name:
 RUNDLE, ROBERT
 Name:
 RUNDLE, ROBERT

 Address:
 36850 OVERSEAS HIGHWAY
 Address:
 2100 WEST FRENCH AVE

 City-St-Zip:
 BIG PINE KEY, FL 33043
 City-St-Zip:
 ORANGE CITY, FL 32763 US

Title: DV () Delete Title: DV (X) Change () Addition

Name: LANDRUM, NEY Name: MAXWELL, CLÍFTON Address: 126 MILL BRANCH ROAD Address: 2601 ATLANTIC AVE

City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip: FERNANDINA BEACH, FL 32034

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: JUDITH MAXWELL DS 01/25/2006