


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

FILED
Apr 20, 2006 08:00 AM
Secretary of State

DOCUMENT # N35954 1. Entity Name TWIN CITIES AMATEUR RADIO CLUB, INC.	
--	---

Principal Place of Business % BRADLEY J. MAFFEI 406 TIGER POINT DRIVE NICEVILLE, FL 32578 US	Mailing Address % BRADLEY J. MAFFEI 406 TIGER POINT DR NICEVILLE FL, 32578 US
---	--



04152006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-2985839	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent MAFFEI, BRADLEY J. 406 TIGER POINT DRIVE NICEVILLE, FL 32578

**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	D MAFFEI, BRADLEY J. 406 TIGER POINT DR NICEVILLE FL, 32578
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANDERSON, HOWARD T. 58 HIDDEN COVE VALPARAISO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MIKLES, CHRISTIAN I. 425 GOVERNMENT ST VALPARAISO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000521223
05/02/06-80127-006 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: Bradley J. Maffei Bradley J. Maffei 4-17-06 850-678-7777
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #