

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 18, 2006 8:00 am
Secretary of State

04-18-2006 90082 013 ****70.00

DOCUMENT # N48243

1. Entity Name

APOPKA COALITION TO IMPROVE OUR NEIGHBORHOOD, INC.



Principal Place of Business

% JOHN H. BRIDGES COMMUNITY CENTER
445 WEST 13TH ST.
APOPKA FL 32703

Mailing Address

PO BOX 157
APOPKA FL 32704
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number
59-3117841

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HARGROVE, CHARLES D ESQ
601 N. MAGNOLIA
ORLANDO FL 32806

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
DP
KING, RICHARD REV
37 E 19TH STREET
APOPKA FL 32703 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
DVP
Clifford Moore
1950 Pomerranian Ct.
Apopka, FL. 32712 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
D
GREEN, CARRIE L
22 WEST 16TH STREET
APOPKA FL 32703 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
D
JOSEPH Clinton Brown, Jr
1554 Errol Parloway
Apopka, FL. 32712 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
D
DANIELS, R.D. REV
1012 S. CLARCONA ROAD
APOPKA FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
Recording Sec'y:
Kay Swift
402 East 13ty. Street
Apopka, Florida 32703 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
D
MILLSAP, SUZIE
172 RAND COURT
APOPKA FL 32703 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
D
Kenneth E. Wilson
1111 N. Rock Springs Rd.
Apopka, Florida 32712 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
D
PEARSON, HENRY
2730 MCQUEEN ROAD
APOPKA FL 32703 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
D
WASHINGTON, G.H. REV
1028 S. LAKE AVE
APOPKA FL 32703 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Eartha Salmon* **Eartha Salmon**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-3-06
Date

407-880-0185
Daytime Phone #