

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006 8:00 am
Secretary of State

04-27-2006 90220 011 ****61.25

DOCUMENT # N49108 1. Entity Name TOO FAR, INC.					
Principal Place of Business 26 NORTH FLORIDA AVENUE INVERNESS, FL 34453 US			Mailing Address P.O. BOX 2709 INVERNESS, FL 34451 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-3124707	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
WILSON, MARCO 1215 S OTTO POINT INVERNESS, FL 34450				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing)</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	P	<input type="checkbox"/> Delete	TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WILSON, MARCO		NAME	SCHMUKAL, GREGORY	
STREET ADDRESS	1215 S. OTTO PT.		STREET ADDRESS	4392 N. ARBOR SHORE TRAIL	
CITY-ST-ZIP	INVERNESS, FL 34450		CITY-ST-ZIP	HERNANDO, FL 34442	
TITLE	V	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HARTMAN, LARRY		NAME	ADAMIC, BOB	
STREET ADDRESS	8686 MARVIN STREET		STREET ADDRESS	1513 CR 435	
CITY-ST-ZIP	FLORAL CITY, FL 34436		CITY-ST-ZIP	LAKE PANASOFFKEE, FL 33538	
TITLE	S	<input type="checkbox"/> Delete	TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRADY, PAT		NAME	BRADY, PAT	
STREET ADDRESS	PO BOX 2185		STREET ADDRESS	1480 S. HOMESTEAD PT.	
CITY-ST-ZIP	INVERNESS, FL 34451		CITY-ST-ZIP	INVERNESS, FL 34450	
TITLE	T	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GALLAGHER, MARCIA		NAME	GRUBMAN, AL	
STREET ADDRESS	10610 GOBBLER DRIVE		STREET ADDRESS	946 PRITCHARD ISLAND RD.	
CITY-ST-ZIP	FLORAL CITY, FL 34436		CITY-ST-ZIP	INVERNESS, FL 34450	
TITLE		<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	SCHNEIDER, JERRY	
STREET ADDRESS			STREET ADDRESS	1020 S. SUNFISH AVE	
CITY-ST-ZIP			CITY-ST-ZIP	INVERNESS, FL 34450	
TITLE		<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	STEINHAUSER, ROL	
STREET ADDRESS			STREET ADDRESS	2952 N. EISENHOWER AVE	
CITY-ST-ZIP			CITY-ST-ZIP	HERNANDO, FL 34442	
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: <i>[Signature]</i> TFRS.			4/25/06 352-860-2762		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		

ATTACHMENT

20037640

RE: DOCUMENT # N49108

11) ADDITIONS

D

BROOKS, DUANE
4057 N. ROSCOE RD.
HERNANDO, FL 34442

D

HEATH, FRANK
8655 S. LAKESHORE PT.
FLORAL CITY, FL 34436

D

SAWYER, WAYNE
7206 S. DUVAL ISLAND DR.
FLORAL CITY, FL 34436