## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000001255

FILED May 02, 2006 Secretary of State

Entity Name: AFP FLORIDA FIRST COAST CHAPTER, INC.

Current Principal Place of Business:		New Prince	New Principal Place of Business:	
P.O. BOX JACKSON	43024 VILLE, FL 32203 US			
Current M	lailing Address:	New Maili	ng Address:	
P.O. BOX JACKSON	43024  VILLE, FL 32203 US			
In accordan	ce with s. 607.193(2)(b), F.S., the corporation did not receiv	•	ce.	
Name and	Address of Current Registered Agent:	Name and	Address of New Registered Agent:	
4348 SOU' SUITE 320	& COMPANY, CPA'S, PA THPOINT BOULEVARD ) IVILLE, FL 32216 US			
	named entity submits this statement for the purpose e of Florida.	e of changing	its registered office or registered agent, or both,	
SIGNATUF	RE:			
	Electronic Signature of Registered Agent		Date	
OFFICERS	S AND DIRECTORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	S ( ) Delete CHURCHES, KIMBERLY 4567 ST. JOHNS BLUFF ROAD, S. JACKSONVILLE, FL 32217  PD ( ) Delete STUBBERFIELD, DARBY 4250 LAKESIDE DRIVE, #204 JACKSONVILLE, FL 32210	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	S (X) Change () Addition MILLER, AMY 1000 SHEARER STREET JACKSONVILLE, FL 32205  PD (X) Change () Addition MCCRAY, BRANDON T 580 W 8TH STREET JACKSONVILLE, FL 32209	
Title: Name: Address: City-St-Zip:	PP ( ) Delete OWENS, JANET 1300 RIVERPLACE BLVD., #500 JACKSONVILLE, FL 32203	Title: Name: Address: City-St-Zip:	PP (X) Change ( ) Addition STUBBERFIELD, DARBY L 4250 LAKESIDE DRIVE JACKSONVILLE, FL 32210	
Title: Name: Address: City-St-Zip:	VPM () Delete YOUNT, TANIA 328 N. OCEAN STREET JACKSONVILLE, FL 32202	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T () Delete UNTERSPAN, REE 7400 SAN JOSE BOULEVARD JACKSONVILLE, FL 32217	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	AD () Delete FRAMPTON, JANET 7400 SAN JOSE BOULEVARD JACKSONVILLE, FL 32217	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: JANET S. FRAMPTON AD 05/02/2006