


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2006 8:00 am
Secretary of State

03-23-2006 90019 006 ****61.25

DOCUMENT # N94000000947

1. Entity Name
 TRI-COUNTY LEAGUE OF CITIES, INC.



Principal Place of Business
 36 W PINE STREET
 SUITE #204
 ORLANDO, FL 32801 US

Mailing Address
 36 W PINE STREET
 SUITE #204
 ORLANDO, FL 32801 US

50005021

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country



03152006 Chg-NP CR2E037 (11/05)

4. FEI Number
 65-0534661

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
 CROTTY, MARILYN E
 36 W PINE STREET, SUITE 204
 ORLANDO, FL 32801

7. Name and Address of New Registered Agent
 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 reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

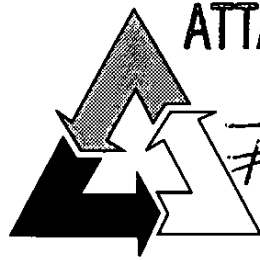
Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD QUESINBERRY, JACK 36 W PINE STREET, STE #204 ORLANDO, FL 32801 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Freeman, Pat 36 W. Pine St. Ste 204 Orlando FL 32801 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FREEMAN, PATRICIA 36 W PINE STREET, STE #204 ORLANDO, FL 32801 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Gemskie, Jerry 36 W. Pine St. Ste 204 Orlando FL 32801 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GANT, GEORGE 36 W PINE ST, STE #204 ORLANDO, FL 32801 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Brooks Bill 36 W. Pine St Ste 204 Orlando FL 32801 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRUHN, GART 36 W PINE ST STE 204 ORLANDO, FL 32801 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Walters Tom 36 W. Pine St. Ste 204 Orlando FL 32801 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RANDOLPH, JOAN 36 W PINE ST, STE #204 ORLANDO, FL 32801 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Bruhn, Gary 36 W. Pine St. Ste 204 Orlando FL 32801 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DRAGO, JOHN 36 W PINE ST, STE #204 ORLANDO, FL 32801 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Till, Kathy 36 W. Pine St. Ste 204 Orlando FL 32801 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Pat Freeman* **PAT FREEMAN** *March 16, 2006* **407-290-1215**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



ATTACHMENT

50005021
#N9400000947

TRI-COUNTY LEAGUE OF CITIES

ORANGE • SEMINOLE • OSCEOLA

OFFICERS AND DIRECTORS

2006

President

Vice Mayor Pat Freeman
City of Altamonte Springs

**1st Vice
President**

Mayor Pro Tem Jerry Gemskie
City of Kissimmee

**2nd Vice
President**

Mayor Bill Brooks
City of Belle Isle

Directors:

Mayor Tom Walters
City of Oviedo

Mayor Gary Bruhn
Town of Windermere

Mayor Michael Teague
City of Edgewood

Mayor Linda Kuhn
City of Sanford

Commissioner Kathy Till
City of Apopka

City Administrator John Drago
City of Longwood

Mayor Jack Quesinberry
City of Winter Garden
Immediate Past President

Vice Mayor Wendell McKinnon
City of Kissimmee
Past President