

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000957

FILED
May 02, 2006
Secretary of State

Entity Name: NATIONAL RETIREES COUNCIL, INC.

Current Principal Place of Business:

1210 LANE AVENUE N.
JACKSONVILLE, FL 32254 US

New Principal Place of Business:

Current Mailing Address:

1210 LANE AVENUE N.
JACKSONVILLE, FL 32254 US

New Mailing Address:

FEI Number: 59-3215210 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DRUMMER, PRESTON
6713 CHAMPLAIN ROAD
JACKSONVILLE, FL 322082416 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCCORT, ROBERT E
Address: 9516 WATERFORD ROAD
City-St-Zip: JACKSONVILLE, FL

Title: ST () Delete
Name: DRUMMER, PRESTON
Address: 6713 CHAMPLAIN ROAD
City-St-Zip: JACKSONVILLE, FL

Title: V () Delete
Name: WARD, JE
Address: 6172 RAMAR COURT
City-St-Zip: JACKSONVILLE, FL 32209

Title: D () Delete
Name: HARTLESS, ERNEST
Address: 605 E. 64TH STREET
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: BELL, ANDY
Address: 1300 RIVERPLACE BLVD., STE. 500
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: SNOWDEN, J.V.
Address: 3110 STRATTON ROAD
City-St-Zip: JACKSONVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PRESTON DRUMMER

ST

05/02/2006

Electronic Signature of Signing Officer or Director

Date