

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005528

FILED
Jul 07, 2006
Secretary of State

Entity Name: MIRACLE STRIP MODEL RAILROAD CLUB INC.

Current Principal Place of Business:

1255A EGLIN PARKWAY
SHALIMAR, FL 32579

New Principal Place of Business:

Current Mailing Address:

1255A EGLIN PARKWAY
SHALIMAR, FL 32579

New Mailing Address:

FEI Number: 59-3374100 **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:

THERRIEM, PETER A
226 COLONY COURT
FORT WALTON BEACH, FL 32547 US

Name and Address of New Registered Agent:

ENDRES, DOUGLAS G TD.
642 RUSSELL BLVD.
FORT WALTON BEACH, FL 32547 US

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: DOUGLAS G. ENDRES

07/07/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FOLLACCHIO, RAYMOND
Address: 207 PILGRAM ST
City-St-Zip: PANAMA CITY BEACH, FL 32407

Title: VPD () Delete
Name: BRAKEBILL, RAY
Address: 903 JUDSON ST
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: TD () Delete
Name: ENDRES, DOUG
Address: 642 RUSSELL BL
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: S () Delete
Name: THERRIGN, PETER
Address: 726 COLONY CT
City-St-Zip: FORT WALTON BEACH, FL 32547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FOLLACCHIO, RAYMOND
Address: 207 PILGRAM ST
City-St-Zip: FORT WALTON BEACH, FL 32547

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: DOUGLAS G. ENDRES

TD

07/07/2006

Electronic Signature of Signing Officer or Director

Date