2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2006 08:00 AM
Secretary of State

DOCUMENT # N96000002685

1. Entity Name
PYCC COUNCIL, INC.

Principal Place of Business	Mailing Address
2201 PASADENA PLACE GULFPORT, FL 33707 US	C/O ANDREW J GILL 5950 PELICAN BAY PLAZA SUITE 1101A GULFPORT, FL 33707 US

DO NOT WRITE IN THIS SPACE

02172006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-3382970

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BACON, DAVID A
2959 1ST AVENUE NORTH
SAINT PETERSBURG, FL 33713-0682

DO NOT WRITE IN THIS SPACE

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 Andrew J Gill 2/16/06
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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	PERONI, LARRY
STREET ADDRESS	2201 PASADENA PLACE
CITY-ST-ZIP	GULFPORT, FL 33707
TITLE	TD
NAME	GILL, ANDREW J
STREET ADDRESS	5950 PELICAN BAY PLAZA
CITY-ST-ZIP	GULFPORT, FL 33707
TITLE	SD
NAME	CAMPBELL, CLAUDIA
STREET ADDRESS	7930 SUN ISLAND S #304
CITY-ST-ZIP	SAINT PETERSBURG, FL 33706
TITLE	VD
NAME	KEATING, EDMUND
STREET ADDRESS	6226 PASADENA PT BLVD
CITY-ST-ZIP	GULFPORT, FL 33707
TITLE	D
NAME	NICKLAS, HARRY
STREET ADDRESS	6 PARIDISE LANE
CITY-ST-ZIP	SAINT PETERSBURG, FL 33706
TITLE	D
NAME	KAPPOS, GEORGE
STREET ADDRESS	5940 PELICAN BAY PLAZA, #702B
CITY-ST-ZIP	GULFPORT, FL 33707

U00000434556
02/25/06-80007-005 61.25

DO NOT WRITE IN THIS SPACE

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: Andrew J Gill 2/16/06 727-381-0800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #