2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005689

FILED May 01, 2006 Secretary of State

Entity Name: NORTHWEST FLORIDA, UNIT 219, OF THE AMERICAN CONTRACT BRIDGE LEAGUE, INC.

Current Principal Place of Business:

New Principal Place of Business:

5001 GRANDE DRIVE #1623 PENSACOLA, FL 32504

3339 EDGEWATER DRIVE GULF BREEZE, FL 32563 US

Current Mailing Address:

New Mailing Address:

5001 GRANDE DRIVE #1623 PENSACOLA, FL 32504 US 3339 EDGEWATER DRIVE GULF BREEZE, FL 32563 US

FEI Number: 59-3433209

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:

Name and Address of New Registered Agent:

WATERFIELD, VIRGINIA 4046 BROKEN ARROW COURT DESTIN, FL 32541

4190 WESTFIELD ROAD PENSACOLA, FL 32503

WESTHOLM, LARRY R

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: LARRY R. WESTHOLM

05/01/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

STD () Delete

HUKE, KAY Name:

5001 GRANDE DRIVE #1623 Address: City-St-Zip: PENSACOLA, FL 32504

Title:

Name:

Name:

Address:

() Delete WATERFIELD, VIRGINIA 4046 BROKEN ARROW COURT

City-St-Zip: DESTIN, FL 32541

Title:

() Delete ANDERSON, CHARLES

Address: City-St-Zip:

305 N. COVE BLVD. PANAMA CITY, FL 32401 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

Name:

HUKE, KAY

Address:

3339 EDGEWATER DRIVE

City-St-Zip:

GULF BREEZE, FL 32563

Title:

(X) Change () Addition

Name: Address: WATERFIELD, VIRGINIA 4046 BROKEN ARROW COURT

City-St-Zip:

DESTIN, FL 32541

Title:

Name:

(X) Change () Addition WESTHOLM, LARRY

Address: City-St-Zip:

4190 WESTFIELD ROAD PENSACOLA, FL 32503

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: KAY L. HUKE Electronic Signature of Signing Officer or Director STD

05/01/2006

Date