## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000007228

FILED May 18, 2006 Secretary of State

Entity Name: FLORIDA ALLIANCE OF BOYS & GIRLS CLUBS, INC.

	Principal Place of Business:	New Principal Place of Business:
	JITVILLE ROAD TA, FL 34237 US	
:urrent N	Mailing Address:	New Mailing Address:
O BOX SARASO	4068 ГА, FL 34230 US	
n accordar	r: 65-0839955 FEI Number Applied For() nce with s. 607.193(2)(b), F.S., the corporation did	•
iame and	d Address of Current Registered Agent:	Name and Address of New Registered Agent:
205 MAN	S, TIMOTHY A NATEE AVE WEST TON, FL 34205 US	LYONS, DANIEL L P.O. BOX 4068 SARASOTA, FL 34230 US
	e named entity submits this statement for the of Florida.	ne purpose of changing its registered office or registered agent, or both
IGNATU	RE: DANIEL L. LYONS	05/18/2006
	Electronic Signature of Registered	Agent Date
FFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO
itle: lame: ddress: ity-St-Zip:	ATD () Delete THACKER, LEE 1226 N. TAMIAMI TRAIL SARASOTA, FL 34236	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
ame: ddress:	VD ( ) Delete PERMUY, GLENN 2742 HARPER WOODS DR MARIETTA, GA 30062	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
ame: ddress: ity-St-Zip: tle: ame: ddress:	PERMUY, GLENN 2742 HARPER WOODS DR	Name: Address:
ame: ddress: ity-St-Zip: ttle: ame: ddress: ity-St-Zip: ttle: ame: ddress:	PERMUY, GLENN 2742 HARPER WOODS DR MARIETTA, GA 30062  DT () Delete PRASAD, M.V. 1230 W. PEACHTREE ST. NW	Name: Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address:
itle: ame: ddress: ity-St-Zip: itle: ame: ddress: ity-St-Zip: itle: ame: ddress: ity-St-Zip: itle: ame: ddress: ity-St-Zip: itle: ame: ity-St-Zip: itle:	PERMUY, GLENN 2742 HARPER WOODS DR MARIETTA, GA 30062  DT () Delete PRASAD, M.V. 1230 W. PEACHTREE ST. NW ATLANTA, GA 30309  D () Delete ORR, LORRAINE 1230 W. PEACHTREE ST. NW	Name: Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address:

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: RONALD E. NOWVISKIE DP 05/18/2006