


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2006 8:00 am
Secretary of State

01-30-2006 90037 031 ****61.25

DOCUMENT # N98000002648	
1. Entity Name THE FLORIDA FOUNDATION FOR RESPONSIBLE ANGLING, INCORPORATED	

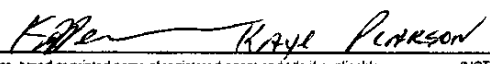
Principal Place of Business 300 GULF STREAM WAY DANIA BEACH, FL 33004	Mailing Address 300 GULF STREAM WAY DANIA BEACH, FL 33004
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country

01052006 Chg-NP CR2E037 (11/05)	
4. FEI Number 59-3544654	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent KRAMER, ROBERT E 300 GULF STREAM WAY DANIA BEACH, FL 33004	
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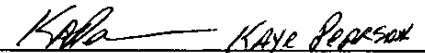
7. Name and Address of New Registered Agent Name KAYE PEARSON Street Address (P.O. Box Number is Not Acceptable) 1115 NE 9 AVE City FT LAUDERDALE FL Zip Code 33304	
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE 	DATE 1-6-06
(NOTE: Registered Agent signature required when reinstating)	

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete KRAMER, ROBERT 300 GULF STREAM WAY DANIA BEACH, FL 33004
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete PUTNAM, TOM 2206 THOMAS DRIVE PANAMA CITY BEACH, FL 32408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete PEEBLES, DIANE P.O. BOX 12855 ST. PETERSBURG, FL 33733
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete NICHOLS, SCOTT 509 LIGHTHOUSE DRIVE NORTH PALM BEACH, FL 33408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete BIERMAN, MARSHA 1301 NW 115TH AVENUE PLANTATION, FL 33323
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete PEARSON, KAYE 1115 NE 9TH AVENUE FT LAUDERDALE, FL 33304

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition PLEASE SEE ATTACHED FOR CHANGES AND ADDITIONS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: 	DATE 1-6-06 DAYTIME PHONE # 954.764-7642
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	

ATTACHMENT

60007851

DOCUMENT # N98000002648

THE FLORIDA FOUNDATION FOR RESPONSIBLE ANGLING, INCORPORATED

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D/P	X	CHANGE	ADDITION
NAME	TOM PUTNAM			
STREET ADDRESS	2206 THOMAS DRIVE			
CITY-ST-ZIP	PANAMA CITY FL 32408			

TITLE	D/V	X	CHANGE	ADDITION
NAME	SCOTT NICHOLS			
STREET ADDRESS	509 LIGHTHOUSE DRIVE			
CITY-ST-ZIP	NORTH PALM BEACH FL 33408			

TITLE	D/S/T	X	CHANGE	ADDITION
NAME	KAYE PEARSON			
STREET ADDRESS	1115 NE 9 AVENUE			
CITY-ST-ZIP	FT LAUDERDALE FL 33304			

TITLE	D	X	CHANGE	ADDITION
NAME	MARSHA BIERMAN			
STREET ADDRESS	12024 NW 9TH PLACE			
CITY-ST-ZIP	CORAL SPRINGS FL 33071			

TITLE	D	CHANGE	X	ADDITION
NAME	JOHN BROWNLEE			
STREET ADDRESS	138 MILANO DRIVE			
CITY-ST-ZIP	ISLAMORADA FL 33036			

TITLE	D	CHANGE	X	ADDITION
NAME	TOM TWYFORD			
STREET ADDRESS	201 FIFTH STREET			
CITY-ST-ZIP	WEST PALM BEACH FL 33401			

TITLE	D	CHANGE	X	ADDITION
NAME	DAVE WORKMAN			
STREET ADDRESS	11702 BEACH BLVD			
CITY-ST-ZIP	JACKSONVILLE FL 32246			