

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003453

FILED  
Sep 05, 2006  
Secretary of State

**Entity Name:** SOLUTIA EMPLOYEES RECREATION ASSOCIATION, INCORPORATED

**Current Principal Place of Business:**

3000 OLD CHEMSTRAND ROAD  
GONZALEZ, FL

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 97  
GONZALEZ, FL 32560

**New Mailing Address:**

**FEI Number:** 59-0976782      **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:**

PALMER, PATRICK  
2446 TRAILWOOD DRIVE  
CANTONMENT, FL 32533      US

**Name and Address of New Registered Agent:**

PALMER, PATRICK  
3520 HWY 196  
MOLINO, FL 32577      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: PATRICK PALMER

09/05/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: SCRUGGS, LENORA  
Address: 761 PINEY LANE  
City-St-Zip: CANTONMENT, FL 32533

Title: TD      ( ) Delete  
Name: PALMER, PATRICK  
Address: 2446 TRAILWOOD DRIVE  
City-St-Zip: CANTONMENT, FL 32533

Title: DV      (X) Delete  
Name: KRAUSE, NATHAN  
Address: 7496 BAYWOODS LANE  
City-St-Zip: PENSACOLA, FL 32504

Title: DS      ( ) Delete  
Name: WISE, SHIRLEY  
Address: 1500 DAY LILY ROAD  
City-St-Zip: CANTONMENT, FL 32533

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD      (X) Change ( ) Addition  
Name: KRAUSE, NATHAN  
Address: 7496 BAYWOODS LANE  
City-St-Zip: PENSACOLA, FL 32504

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: PATRICK PALMER

TD

09/05/2006

Electronic Signature of Signing Officer or Director

Date