

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005395

FILED  
Feb 20, 2006  
Secretary of State

**Entity Name:** CATALINA RECREATION & IMPROVEMENT ASSOCIATION, INC.

**Current Principal Place of Business:**

2501 CATALINA DR  
ORLANDO, FL 32805

**New Principal Place of Business:**

**Current Mailing Address:**

2501 CATALINA DR  
ORLANDO, FL 32805

**New Mailing Address:**

**FEI Number:** 59-3541407

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BATIATO, RICHARD D  
2501 CATALINA DR  
ORLANDO, FL 32805 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: PARDEE, JANINE  
Address: 2513 CATALINA DR  
City-St-Zip: ORLANDO, FL 328055803 US

Title: VD ( ) Delete  
Name: MALONE, MICHAEL K  
Address: 2514 CARIBBEAN CT  
City-St-Zip: ORLANDO, FL 32805

Title: STD ( ) Delete  
Name: HOGGE, JAMES  
Address: 2205 LAUDERDALE CT  
City-St-Zip: ORLANDO, FL 32805

Title: D ( ) Delete  
Name: IVY, KATHIE  
Address: 2705 SEABEREEZE CT  
City-St-Zip: ORLANDO, FL 32805

Title: D ( ) Delete  
Name: BAKER, KATHY  
Address: 2705 CATALINA DR  
City-St-Zip: ORLANDO, FL

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JANINE PARDEE

PD

02/20/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date