

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005528

FILED
Apr 20, 2006
Secretary of State

Entity Name: FRIENDS OF THE CHASSAHOWITZKA NATIONAL WILDLIFE REFUGE COMPLEX, INC.

Current Principal Place of Business:

1502 S.E. KINGS BAY DRIVE
CRYSTAL RIVER, FL 34429

New Principal Place of Business:

Current Mailing Address:

1502 S.E. KINGS BAY DRIVE
CRYSTAL RIVER, FL 34429

New Mailing Address:

FEI Number: 59-3505874

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRAUS, JAMES
1502 S.E. KINGS BAY DRIVE
CRYSTAL RIVER, FL 34429 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: T () Delete
Name: KNUDSEN, SHIRLEY E
Address: 28 AGERATUM COURT
City-St-Zip: HOMOSASSA, FL 34426

Title: P () Delete
Name: BLUE-MCLEAN, LACE
Address: 3414 S. FITCH AVE.
City-St-Zip: INVERNESS, FL 34452

Title: S () Delete
Name: PETERLIN, JOHN
Address: 3407 N. BAY AVE.
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: VP () Delete
Name: CASSELBERRY, PAT
Address: 2890 N. COMMACHE POINT
City-St-Zip: CRYSTAL RIVER, 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: VP (X) Change () Addition
Name: CASEY, EMILY
Address: 1430 EAST HARTFORD ST
City-St-Zip: INVERNESS, FL 34453

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: SHIRLEY E KNUDSEN

T

04/20/2006

Electronic Signature of Signing Officer or Director

Date