

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 12, 2006 8:00 am
Secretary of State

05-01-2006 90301 014 ****61.25

DOCUMENT # N99000000917					
1. Entity Name ACTION FOR A BETTER COMMUNITY, INC.					
Principal Place of Business 710 CEDAR PL FORT PIERCE FL 34950			Mailing Address P.O. BOX 12764 FORT PIERCE FL 34979		
2. Principal Place of Business 8346-106th AVE			3. Mailing Address 8346-106th AVE		
Suite, Apt. #, etc. VERO BEACH FL			Suite, Apt. #, etc. 8346-106th AVE		
City & State VERO BEACH FL			City & State VERO BEACH FL		
Zip 32967	Country Indian River	Zip 32967	Country Indian River	4. FEI Number 65-0895095	
6. Name and Address of Current Registered Agent GARVIN, SHIRLEY 507 N. 6TH ST. FT. PIERCE FL 34950				7. Name and Address of New Registered Agent Shirley Garvin 8346-106th AVE VERO BEACH FL City FL Zip Code 32967	
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 <u>Shirley Garvin</u> DATE <u>2/8/06</u> Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)					
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE D Director	NAME MIMS, HENRY J JR.	STREET ADDRESS 2612 ROBERT TRENT JONES DRIVE ORLANDO FL 32835	TITLE Christopher Garvin	NAME 8346-106th AVE	STREET ADDRESS VERO BEACH FL 32967
TITLE D Director	NAME GARVIN, ERNEST	STREET ADDRESS P.O. BOX 12764 FORT PIERCE FL 34979	TITLE ERNEST Garvin	NAME 8346-106th AVE	STREET ADDRESS VERO BEACH FL 32967
TITLE P President	NAME GARVIN, SHIRLEY	STREET ADDRESS 710 CEDAR PL FORT PIERCE FL 34950	TITLE Shirley Garvin	NAME 8346-106th AVE	STREET ADDRESS VERO BEACH FL 32967
TITLE D Secretary	NAME LEE, PATSY	STREET ADDRESS 707 NTH 1TH ST. INVERNESS FL 34450	TITLE Marcia Spears	NAME 16524 CYPRESS BRIDGE DR.	STREET ADDRESS CYPRESS TX 77429
TITLE 	NAME 	STREET ADDRESS 	TITLE 	NAME 	STREET ADDRESS
TITLE 	NAME 	STREET ADDRESS 	TITLE 	NAME 	STREET ADDRESS
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: <u>Shirley Garvin</u>			DATE: <u>2/8/06</u> PHONE: <u>772-584-9073</u>		