

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001529

FILED
Jun 13, 2006
Secretary of State

Entity Name: FLORIDA BIG BEND FLYFISHERS, INC.

Current Principal Place of Business:

P.O. BOX 12353
TALLAHASSEE, FL 323172353

New Principal Place of Business:

4141 SUGAR BEAR DRIVE
TALLAHASSEE, FL 32311

Current Mailing Address:

P.O. BOX 12353
TALLAHASSEE, FL 323172353

New Mailing Address:

4141 SUGAR BEAR DRIVE
TALLAHASSEE, FL 32311

FEI Number: 01-0868438 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:

SOUTHWELL, WAYNE
1270 SMOKE RISE LANE
TALLAHASSEE, FL 32317 US

Name and Address of New Registered Agent:

BELL, GERALD F
4141 SUGAR BEAR DRIVE
TALLAHASSEE, FL 32311 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: GERALD F. BELL

06/13/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MITCHELL, BOB
Address: P.O. BOX 12353
City-St-Zip: TALLAHASSEE, FL 323172353

Title: VD () Delete
Name: ALLEN, CAL
Address: P.O. BOX 12353
City-St-Zip: TALLAHASSEE, FL 323172353

Title: SD () Delete
Name: GREENBERG, ANN
Address: P.O. BOX 12353
City-St-Zip: TALLAHASSEE, FL 323172353

Title: TD (X) Delete
Name: SOUTHWELL, WAYNE
Address: P.O. BOX 12353
City-St-Zip: TALLAHASSEE, FL 323172353

Title: D (X) Delete
Name: GERLIN, LANCE
Address: PO BOX 12353
City-St-Zip: TALLAHASSEE, FL 32317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BELL, GERALD F
Address: 4141 SUGAR BEAR DRIVE
City-St-Zip: TALLAHASSEE, FL 32311

Title: VD (X) Change () Addition
Name: MITCHELL, ROBERT J
Address: 2309 KENILWORTH DR
City-St-Zip: ALBANY, GA 31707

Title: TD (X) Change () Addition
Name: GERLIN, LANCE
Address: 1557 CRISTOBAL RD
City-St-Zip: TALLAHASSEE, FL 32303

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: GERALD F. BELL

PD

06/13/2006

Electronic Signature of Signing Officer or Director

Date