

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001721

FILED
Apr 05, 2006
Secretary of State

Entity Name: CIVILIAN MILITARY COMMUNITY FOUNDATION, INC.

Current Principal Place of Business:

817 DIXON BOULEVARD, SUITE 6-B
COCOA, FL 32922

New Principal Place of Business:

Current Mailing Address:

817 DIXON BOULEVARD, SUITE 6-B
COCOA, FL 32922

New Mailing Address:

FEI Number: 59-3584384

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECK, DONALD T
817 DIXON BOULEVARD, SUITE 6-B
COCOA, FL 32922 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: CD () Delete
Name: SPAIN, DAVID
Address: 3901 N. ATLANTIC AVENUE
City-St-Zip: COCOA BEACH, FL 32931

Title: PD () Delete
Name: BECK, DONALD T
Address: 1150 COVINA STREET
City-St-Zip: COCOA, FL 32927

Title: D () Delete
Name: GAY, FRED
Address: 1390 WALTON HEALTH COURT
City-St-Zip: ROCKLEDGE, FL 32955

Title: SD () Delete
Name: ALLENDER, JERRY W
Address: 118 COUNTRY CLUB DRIVE
City-St-Zip: TITUSVILLE, FL 32780

Title: TD () Delete
Name: HOUSER, STEPHEN
Address: 535 DELANNOY
City-St-Zip: COCOA, FL 32922

Title: D () Delete
Name: ROBERTS, ROBI K
Address: 67 BROAD ST
City-St-Zip: TITUSVILLE, FL 32780

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:

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: DONALD T. BECK

PD

04/05/2006

Electronic Signature of Signing Officer or Director

Date