

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N99000003136

1. Entity Name
SOUTHERN BAND OF THE CHEROKEES, INC.



Principal Place of Business
108 E MELBOURNE AVE
MELBOURNE, FL 32901

Mailing Address
108 E MELBOURNE AVE
MELBOURNE, FL 32901

**FILED
Mar 28, 2006 8:00 am
Secretary of State**

03-28-2006 90128 024 ****70.00



03012006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-3582830	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

FIELD, STANLEY A
108 E MELBOURNE AVE
MELBOURNE, FL 32901

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE CD
NAME FIELD, STANLEY
STREET ADDRESS 108 E MELBOURNE AVE.
CITY-ST-ZIP MELBOURNE, FL 32901

TITLE D
NAME REDDITT, BENJAMIN A
STREET ADDRESS 35 A MAIN STREET, P.O. BOX 343
CITY-ST-ZIP CALIFON, NJ 07830

TITLE S
NAME BAGERSTOCK, GAIL A
STREET ADDRESS 4508 SYCAMORE RD.
CITY-ST-ZIP CINCINNATI, OH 45236

TITLE T
NAME REYNOLDS, INEZ M
STREET ADDRESS 5708 HIGHLAND AVE.
CITY-ST-ZIP CINCINNATI, OH 45216

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

*← Spelling -
S
BagerStock
should be:
BurgerStock
Thanks -*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Stanley A. Field*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/18/2006 (321) 724-1597

Date

Daytime Phone #