


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2006 8:00 am
Secretary of State

04-06-2006 90007 041 ****61.25

DOCUMENT # N99000006144

1. Entity Name
GLADES COUNTY ECONOMIC DEVELOPMENT COUNCIL, INC.



Principal Place of Business
**900 US HWY SW
 MOORE HAVEN, FL 33471**

Mailing Address
**POST OFFICE BOX 1003
 MOORE HAVEN, FL 33471**



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

03092006 Chg-NP CR2E037 (11/05)

City & State

4. FEI Number
65-0964989

Applied For
 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BARTON, PEGGY
 2020 OLD LAKEPORT RD LOT #23
 MOORE HAVEN, FL 33471

Name **Tracy Whirls**
 Street Address (P.O. Box Number is Not Acceptable)
900 US HWY 27
MOORE HAVEN
 City **FL** Zip Code **33471**

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 *Tracy Whirls* DATE 4/3/06

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing 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 **DP** Delete
 NAME **MARTZ, JOHN**
 STREET ADDRESS **PO BOX 519**
 CITY-ST-ZIP **MOORE HAVEN, FL 33471**

TITLE **CHAIRMAN** Change Addition
 NAME **Cheryl Eby**
 STREET ADDRESS **RAWLS REAL ESTATE, 528 E. Sugarland Hwy.**
 CITY-ST-ZIP **Clewiston, FL 33440**

TITLE **DT** Delete
 NAME **DANNENHAUER, DAVID**
 STREET ADDRESS **P.O. BOX 1592**
 CITY-ST-ZIP **MOORE HAVEN, FL 33471**

TITLE **Patty Register, vice chair** Change Addition
 NAME **GATORAMA**
 STREET ADDRESS **P.O. BOX 248**
 CITY-ST-ZIP **PALMDALE, FL 33944**

TITLE **DV** Delete
 NAME **HOLBROOK, DENISE**
 STREET ADDRESS **4382 INDIAN HILLS DR**
 CITY-ST-ZIP **MOORE HAVEN, FL 33471**

TITLE **Kevin Thomas, secretary** Change Addition
 NAME **CIL Holdings, Ltd**
 STREET ADDRESS **3373 Pellwood Terrace**
 CITY-ST-ZIP **LaBelle, FL 33935**

TITLE **S** Delete
 NAME **PLANTY, RHODA**
 STREET ADDRESS **2365 HWY. 27 N.**
 CITY-ST-ZIP **MOORE HAVEN, FL**

TITLE **Tracy Whirls, executive director** Change Addition
 NAME **Tracy Whirls**
 STREET ADDRESS **900 US HWY 27**
 CITY-ST-ZIP **MOORE HAVEN, FL 33471**

TITLE Delete

TITLE Change Addition

TITLE Delete

TITLE Change Addition

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: *Tracy Whirls* Tracy Whirls 4/3/06 (863) 946-0300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #