


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2005 8:00 am
Secretary of State

05-05-2005 90082 035 ****61.25

DOCUMENT # 703463					
1. Entity Name HEINTZELMAN EMPLOYEE CLUB, INC.					
Principal Place of Business 2424 JOHN YOUNG PKWY. ORLANDO, FL 32804			Mailing Address 2424 JOHN YOUNG PKWY. ORLANDO, FL 32804		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-6151228	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
MERCER, EILEEN 2424 JOHN YOUNG PARKWAY ORLANDO, FL 32804			Name Sharon Hook Street Address (P.O. Box Number is Not Acceptable) 2424 N John Young Pkwy City Orlando FL Zip Code 32804		
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 <i>Sharon Hook</i> <small>Signature, typed or printed name of registered agent and title if applicable.</small>			DATE <i>4/29/05</i> <small>DATE</small>		
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	<input type="checkbox"/> Delete	TITLE	John Wilson D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HOOK, SHARON		NAME	2424 John Young Pkwy	
STREET ADDRESS	2424 JOHN YOUNG PKWY		STREET ADDRESS	Orlando FL	
CITY-ST-ZIP	ORLANDO, FL		CITY-ST-ZIP		
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MERCER, EILEEN		NAME	Gary Nield	
STREET ADDRESS	2424 JOHN YOUNG PKWY		STREET ADDRESS	2424 John Young Pkwy	
CITY-ST-ZIP	ORLANDO, FL		CITY-ST-ZIP	Orlando FL 32804	
TITLE	D	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BROWN, JOSEPH		NAME	Mike Logan	
STREET ADDRESS	2424 HOUN YOUNG PKWY		STREET ADDRESS	2424 N John Young Pkwy	
CITY-ST-ZIP	ORLANDO, FL 32804		CITY-ST-ZIP	Orlando FL 32804	
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEONARD, ROBERT		NAME		
STREET ADDRESS	2424 JOHN YOUNG PKWY		STREET ADDRESS		
CITY-ST-ZIP	ORLANDO, FL 32804		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WARREN, ROGER		NAME		
STREET ADDRESS	2424 JOHN YOUNG PKWY		STREET ADDRESS		
CITY-ST-ZIP	ORLANDO, FL 32804		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>Sharon Hook</i>		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: Sharon Hook		Date: <i>4/29/05</i> Daytime Phone #: <i>407-298-1000</i>	