2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707025

FILED Jun 28, 2005 Secretary of State

Entity Name: THE FLORIDA STATE DEMOLAY ASSOCIATION, INC.

Current Pr	incipal Place of Business:	New Principal Place of Business:
6390 US 19 PINELLAS	NORTH PARK, FL 33781 US	
Current Ma	ailing Address:	New Mailing Address:
6390 US 19 PINELLAS	NORTH PARK, FL 33781 US	
	59-1271058 FEI Number Applied I te with s. 607.193(2)(b), F.S., the corpora Address of Current Registered A	tion did not receive the prior notice.
WARDELL 6390 US 19 PINELLAS	,	
The above in the State		t for the purpose of changing its registered office or registered agent, or both,
SIGNATUR	RE:	
	Electronic Signature of Regis	tered Agent Date
OFFICERS	AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	P () Delete MARTI, WILLIAM A 5509 VANBUREN STREET HOLLYWOOD, FL 33021	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	T () Delete SCHVEY, ROBERT M 2938 SANDY BRANCH LANE JACKSONVILLE, FL 32257	Title: D (X) Change () Addition Name: LYNN, RICHARD Address: POST OFFICE BOX 351090 City-St-Zip: MIAMI, FL 33135
Title: Name: Address: City-St-Zip:	S () Delete WARDELL, W. GORDON 6390 US 19 NORTH PINELLAS PARK, FL 33781	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete HUNT, G LAWRENCE 6108 TINLEY TERRACE SANFORD, FL 32773	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete GLENDINNING, RUSSELL B 4496 GOLDEN LAKE DRIVE SARASOTA, FL 34233	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete ANDERSON, GORDON L POST OFFICE BOX 957 ORMOND BEACH, FL 32175	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 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 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: W. GORDON WARDELL S 06/28/2005