2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jul 08, 2005 8:00 am
Secretary of State
07-08-2005 90019 042 ****61.25

DOCUMENT # 732268

1. Entity Name

SHOCKLEY HILL CLUB INC.

Principal Place of Business	Mailing Address
20335 BLUE WING ROAD ALTOONA FL 32702 US	P. O. BOX 583 ALTOONA FL 32702 US
Shockley Hill Club Inc.	

JUU55059

1st MOORE CR2E037 (10/04)

2. Principal Place of Business	3. Mailing Address
20335 Blue Wing Rd	PO Box 583
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Altoona FL	City & State: Altoona FL
Zip: 32702 Country: LAKE	Zip: 32702 Country: LAKE

4. FEI Number: 59-1647615 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

RHEA, DOLORES L
20420 BLUE WING ROAD
ALTOONA FL 32702

7. Name and Address of New Registered Agent

Name: BLOYS, ROSALIE
Street Address (P.O. Box Number is Not Acceptable): 20414 GADWALL ROAD
City: ALTOONA FL Zip Code: 32702

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: Rosalie Bloys 2-2-05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2005

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PT RHEA, DOLORES L 20420 GREEN WING RD ALTOONA FL 32702	☒ Delete	P RUSH, CHARLOTTE 20434 GADWALL ROAD ALTOONA, FL 32702	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP RUSH, CHARLOTTE 20434 GADWALL RD ALTOONA FL 32702	☒ Delete	TREASURER ROMEYN, BETTY 20245 CANVAS BACK ROAD ALTOONA, FL 32702	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BLYS, ROSALLE 20414 GADWELL RD ALTOONA FL 32702	☒ Delete	S BLOYS, ROSALIE 20414 GADWALL ROAD ALTOONA, FL 32702	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T PALMER, GERALDINE 20422 GREEN WING DR ALTOONA FL 32702	☒ Delete	TRUSTEE BATCHLER, JACK 19509 SUNSET STRIP ALTOONA, FL 32702	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SLATER, DAVID 19440 SUNSET STRIP ALTOONA FL 32702	☒ Delete	TRUSTEE BATCHLER, MARY 19509 SUNSET STRIP ALTOONA, FL 32702	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T STRONG, RODNEY 38000 US 19 LOT 19 ALTOONA FL 32702	☒ Delete	TRUSTEE EGGERT, JANE 47228 DEER ROAD ALTOONA, FL 32702	☒ Change	☐ Addition

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.

352-669619

SIGNATURE: BETTY ROMEYN, TREASURER Betty Elizabeth Romeyn 12/05
* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT
#732268
5005759

I AM Sorry this is
Late it was filed wrong
I didn't Know I was
to pay this we want
to pay this
Sincerely
Tres. Betty Romeyn
Please call me if this
is not right I will do
ALL I CAN to right this
1-352 669-6191