2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007741

FILED Jun 04, 2004 Secretary of State

Entity Name: CENTRAL FLORIDA CHAPTER OF THE AMERICAN FENCE ASSOCIATION INC.

Current Principal Place of Business: New Principal Place of Business:

11313 S.R. 52 2315 W. CYPRESS ST. HUDSON, FL 34669 TAMPA, FL 33609

Current Mailing Address: New Mailing Address:

11313 S.R. 52 2315 W. CYPRESS ST. HUDSON, FL 34669 TAMPA, FL 33609

FEI Number: 59-3682579 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BURTON, ELLEN TAYLOR, KATHY
5298 16TH AVE. NO. 2315 W. CYPRESS ST.
ST. PETERSBURG, FL 33710 US TAMPA, FL 33609 US

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.

SIGNATURE: KATHY TAYLOR 06/04/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D () Delete Title: P/D (X) Change () Addition Name: BURTON, JESSICA L Name: BROCK, KEITH

 Name:
 Brock, KETT

 Address:
 11315 SR 52
 Address:
 2315 W. CYPRESS ST.

 City-St-Zip:
 HUDSON, FL 34669
 City-St-Zip:
 TAMPA, FL 33609

Title: VP/D () Delete Title: () Change () Addition

 Name:
 MCCONNIE, ANDREAS
 Name:

 Address:
 4707 S 30 AVE.
 Address:

 City-St-Zip:
 TAMPA, FL 33619
 City-St-Zip:

Title: S/D () Delete Title: () Change () Addition

 Name:
 WALCAZYK, EVELYN
 Name:

 Address:
 P.O. BOX
 Address:

 City-St-Zip:
 BARTOW, FL 33831
 City-St-Zip:

Title: T/D () Delete Title: () Change () Addition

 Name:
 TAYLOR, KATHY
 Name:

 Address:
 2315 WEST CYPRESS STREET
 Address:

 City-St-Zip:
 TAMPA, FL 33609
 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: KATHY TAYLOR T 06/04/2004