2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2005
Secretary of State

DOCUMENT# N04000003894

Entity Name: LORIDA COMMUNITY CLUB, INC

Current Principal Place of Business:

OAK ST
LORIDA, FL 33857

New Principal Place of Business:

Current Mailing Address:

POB 581
LORIDA, FL 33857

New Mailing Address:

FEI Number: 20-1070857 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BONNIE, AMES J
1628 HICKS RD
LORIDA, FL 33857 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: AMES, BONNIE J
Address: 1628 HICKS RD
City-St-Zip: LORIDA, FL 33857

Title: V ( ) Delete
Name: AMES, JOHN E
Address: 1628 HICKS RD
City-St-Zip: LORIDA, FL 33857

Title: T ( ) Delete
Name: MCCLELLAND, PAMELA
Address: 2525 5TH AVE
City-St-Zip: LORIDA, FL 33857

Title: S ( ) Delete
Name: JACOBS, LISA
Address: 3512 HICKS RD
City-St-Zip: LORIDA, FL 33857

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change ( ) Addition
Name: LAYPORT, WENDY
Address: 305 ARBUCKLE CREEK ROAD
City-St-Zip: LORIDA, FL 33857

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: BONNIE J AMES P 02/10/2005

Electronic Signature of Signing Officer or Director — Date