

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2005 8:00 am
Secretary of State

01-31-2005 90084 011 ****70.00

DOCUMENT # N15153					
1. Entity Name ANNIE W. JOHNSON SENIOR SERVICE CENTER, INCORPORATED					
Principal Place of Business 1991 TEST ST. P.O. BOX 1951 DUNNELLON, FL 32630			Mailing Address 1991 TEST ST. P.O. BOX 1951 DUNNELLON, FL 32630		
2. Principal Place of Business		3. Mailing Address		01242005 Chg-NP CR2E037 (10/03)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 59-2757655	
City & State		City & State		Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
MILLS, LYDIA 1655 W. ST. ELIZABETH PL CITRUS SPRINGS, FL 34434			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing 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	D MARTINEZ, AL P.O. BOX 328 DUNNELLON, FL 34430	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	EDM LYDIA MILLS 1655 W. ST. ELIZABETH ST. DUNNELLON, FL 34434	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCKINNON, BARBARA 7881 N SARAZEN DR CITRUS SPRINGS, FL 34434	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KEELE, JANE 20160 RIVER DR DUNNELLON, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OLSEN, DORIS E 22875 SW 117TH STREET DUNNELLON, FL	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EDM NEWELL, CHERYL L 10316 N GARDNER WAY DUNNELLON, FL 34434	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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.					
SIGNATURE: <u>LYDIA MILLS</u> <u>Lydia Mills</u> <u>1/26/05</u> <u>352-489-8021</u>					