## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000000163

FILED Jun 22, 2005 Secretary of State

Entity Name: TURTLE & TORTOISE CLUB OF FLORIDA, INC.

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

C/O CHARLES H. GAUT

1419 BEVERLY POINT RD.

LEESBURG, FL 34748

C/O RICHARD C. TREIN

1155 LEEWARD DR.

DELTONA, FL 32738

Current Mailing Address: New Mailing Address:

C/O CHARLES H. GAUT

1419 BEVERLY POINT RD.

LEESBURG, FL 34748

C/O RICHARD TREIN
PO BOX 950516
LAKE MARY, FL 32795

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

GAUT, CHARLES H
TREIN, RICHARD C
1419 BEVERLY POINT RD.
LEESBURG, FL 34748 US
TREIN, RICHARD C
1155 LEEWARD DR.
DELTONA, FL 32738 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: RICHARD C. TREIN 06/22/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 DP () Delete
 Title:
 DP (X) Change () Addition

 Name:
 KING, MICHAEL A
 Name:
 BENNETT, MARVIN

 Address:
 14619 KITLANSELT WAY
 Address:
 5440 LAKE JESSAMINE DRIVE

City-St-Zip: ORLANDO, FL 32828 City-St-Zip: ORLANDO, FL 32839

Title: DV ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BENNETT, MARVIN
 Name:

 Address:
 5440 LAKE JESSAMINE DRIVE
 Address:

 City-St-Zip:
 ORLANDO, FL 32839
 City-St-Zip:

Title: DT ( ) Delete Title: DT (X) Change ( ) Addition

 Name:
 GAUT, CHARLES H
 Name:
 TREIN, RICHARD C

 Address:
 1419 BEVERLY POINT RD.
 Address:
 1155 LEEWARD DR.

 City-St-Zip:
 LEESBURG, FL 34748
 City-St-Zip:
 DELTONA, FL 32738

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: RICHARD C. TREIN DT 06/22/2005