

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Feb 04, 2008 8:00 am
Secretary of State

02-04-2008 90038 021 ****70.00



DOCUMENT # N96000002881
1. Entity Name
UNITED STATES CROQUET ASSOCIATION, INC.

Principal Place of Business: **700 FLORIDA MANGO RD WEST PALM BEACH FL 33406**
Mailing Address: **700 FLORIDA MANGO RD WEST PALM BEACH FL 33406**



2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address:
Suite, Apt. #, etc.
City & State
Zip Country

1st MOORE CR2E037 (10/07)

4. FEI Number: **13-2970598**
Applied For:
Not Applicable:

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

6. Name and Address of Current Registered Agent
**HAYES, SHEREEN S
14663 76TH RD N
LOXAHATCHEE FL 33470**

7. Name and Address of New Registered Agent
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: _____
Signature, typed or printed name of registered agent and title (optional) (NOTE: Registered Agent signature is required when re-registering) DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2008**

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		
TITLE: UHLMAN, CARL	7705 6TH AVCE N SEATTLE WA 98115	<input checked="" type="checkbox"/> Delete
TITLE: ROBINSON, ANNE FROST	21 VINCENT AVENUE ONTARIO CA LOS I	<input type="checkbox"/> Delete
TITLE: CURTIS, RICHARD	97 HARPER ST ROCHESTER NY 14607	<input type="checkbox"/> Delete
TITLE: ELIASSON, GARTH	P.O. BOX 208 MONMOUTH OR 97361	<input type="checkbox"/> Delete
TITLE: LEE, HANNA	7315 SW POINT WAY COLUMBIA MD 81045	<input type="checkbox"/> Delete
TITLE: IVP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE: EILEEN SOO	3438 LOCHNOVA PKWY, DURHAM N. CAROLINA, 27705-5448	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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, for all other like empowered.

SIGNATURE: *[Signature]* **SHEREEN HAYES.** 1/08/08