

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15466

Entity Name: TROUT RIVER CLUB, INC.

FILED
Jul 05, 2005
Secretary of State

Current Principal Place of Business:

9745 LEM TURNER ROAD
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

9745 LEM TURNER ROAD
JACKSONVILLE, FL 322088563

New Mailing Address:

9745 LEM TURNER ROAD
JACKSONVILLE, FL 322188563

FEI Number: 51-0534803 FEI Number Applied For () FEI Number Not Applicable () 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:

ALEXANDER, SARAH
539 W 61ST ST
JACKSONVILLE, FL 32208 US

Name and Address of New Registered Agent:

BYRD, THOMAS E PRES.
10564 CITRUS LANE
JACKSONVILLE, FL 32218 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: THOMAS E. BYRD

07/05/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: ALEXANDER, SARAH
Address: 539 W 61ST ST
City-St-Zip: JACKSONVILLE, FL 32208

Title: T () Delete
Name: CALEWARTS, PAUL
Address: 9504 GIBSON AVE
City-St-Zip: JACKSONVILLE, FL 32208

Title: VP () Delete
Name: NEWMAN, LLOYD
Address: 8721 ADAMS AVE
City-St-Zip: JACKSONVILLE, FL 32208

Title: TD () Delete
Name: RICHARDSON, JAMES
Address: 10327 DENTON ROAD
City-St-Zip: JACKSONVILLE, FL 32226

Title: 5THM (X) Delete
Name: RATLIFF, MARSHALL
Address: 109103 TROUT RIVER DR #8
City-St-Zip: JACKSONVILLE, FL 32208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BYRD, THOMAS E
Address: 10564 CITRUS LANE
City-St-Zip: JACKSONVILLE, FL 32218

Title: VP (X) Change () Addition
Name: NEWMAN, LLOYD
Address: 8721 ADAMS AVE.
City-St-Zip: JACKSONVILLE, FL 32208

Title: T (X) Change () Addition
Name: BLOUNT, PATRICIA A
Address: 9923 SOUTH ST.
City-St-Zip: JACKSONVILLE, FL 32208

Title: S (X) Change () Addition
Name: RICHARDSON, JAMES
Address: 10327 DENTON ROAD
City-St-Zip: JACKSONVILLE, FL 32226

Title: () Change () Addition
Name:
Address:
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: THOMAS E. BYRD

PRES

07/05/2005

Electronic Signature of Signing Officer or Director

Date