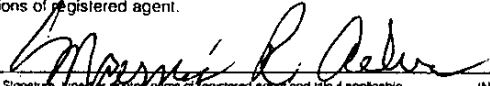
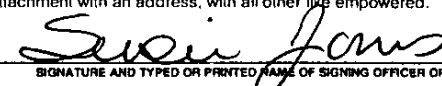


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 15, 2005 8:00 am
Secretary of State

08-15-2005 90083 005 ****70.00

DOCUMENT # 704468 1. Entity Name SEMINOLE COMMUNITY CENTER					
Principal Place of Business 1470 CEDAR STREET PO BOX 5294 NICEVILLE, FL 32578			Mailing Address 1470 CEDAR STREET PO BOX 5294 NICEVILLE, FL 32578		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2913494	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
FIELDS, WARREN 1538 HICKORY ST. NICEVILLE, FL 32578			Name MARVIS ADAMS Street Address (P.O. Box Number is Not Acceptable) 1461 Hickory Street City Niceville, FL Zip Code 32578		
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 if applicable.			DATE 8-11-05 (NOTE: Registered Agent signature required when reinstating)		
Filing Fee is \$61.25 Due by September 7, 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	D	☒ Delete	TITLE	Susie Jones	☐ Change ☒ Addition
NAME	HERRING, ROBYN		NAME	1451 Hickory Street	
STREET ADDRESS	1421 CATMAR RD		STREET ADDRESS	Niceville, FL 32578	
CITY-ST-ZIP	NICEVILLE, FL 32578		CITY-ST-ZIP		
TITLE	VD	☐ Delete	TITLE	CD	☒ Change ☐ Addition
NAME	MURPHY, CHARLES		NAME	MURPHY, CHARLES	
STREET ADDRESS	1457 LIVE OAK		STREET ADDRESS	1457 Live Oak	
CITY-ST-ZIP	NICEVILLE, FL 32578		CITY-ST-ZIP	Niceville, FL 32578	
TITLE	TD	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	BAILEY, GEORGIA		NAME		
STREET ADDRESS	1440 CATMAR ROAD		STREET ADDRESS		
CITY-ST-ZIP	NICEVILLE, FL 32578		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE	VD	☒ Change ☐ Addition
NAME	HINES, WILLIE		NAME	Hines, Willie	
STREET ADDRESS	1443 CYPRESS ST.		STREET ADDRESS	1443 cypress Street	
CITY-ST-ZIP	NICEVILLE, FL 32578		CITY-ST-ZIP	Niceville, FL 32578	
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	VADEN, BETTY JEAN		NAME		
STREET ADDRESS	1489 CATMAR ROAD		STREET ADDRESS		
CITY-ST-ZIP	NICEVILLE, FL 32578		CITY-ST-ZIP		
TITLE	SD	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	MCCLAMMA, STEPHANIE		NAME		
STREET ADDRESS	1470 CYPRESS ST.		STREET ADDRESS		
CITY-ST-ZIP	NICEVILLE, FL 32578		CITY-ST-ZIP		
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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date 8-11-2005 Daytime Phone # 850-897-2073		

50061716



06302005 Chg-NP CR2E037 (10/03)

ATTACHMENT

#1704468

S.C.C., Inc. Board of Directors for 2005

50041216

Charles Murphy
1457 Live Oak St.
Niceville, FL 32578

CD

Willie Hines
1443 Cypress St.
Niceville, FL 32578

VD

Stephanie Mc Clamma
1474 Cypress St.
Niceville, FL 32578

SD

Georgia Bailey
1440 Cat-Mar Rd.
Niceville FL 32578

TD

Susie Jones
1451 Hickory St.
Niceville, FL 32578

Jean Vaden
1489 Cat-Mar Rd.
Niceville, FL 32578

Eunie Mae Camley
1568 Cedar St.
Niceville, FL 32578

Sam Mirsky
1468 Cypress St.
Niceville, FL 32578