

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705137

FILED
Mar 01, 2005
Secretary of State

Entity Name: WYOMING ANTELOPE CLUB, FLORIDA CHAPTER, INC.

Current Principal Place of Business:

3700 126TH AVE N
PINELLAS PK, FL 34664

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 22352
ST PETERSBURG, FL 337422352 US

New Mailing Address:

FEI Number: 59-2506422

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TADDER, DAVID A
7350 14TH ST. AVE.
SAINT PETERSBURG, FL 33702 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: MCNAMARA, JOHN M
Address: 5763 CEDAR STREET, N.E.
City-St-Zip: ST PETERSBURG, FL 35703

Title: SD () Delete
Name: DIPPLE, FRANK B.,
Address: 7070 60TH STREET N
City-St-Zip: PINELLAS PARK, FL

Title: P () Delete
Name: HAYWORTH, CHARLES R
Address: 1320 50TH AVENUE NE
City-St-Zip: ST. PETERSBURG, FL 33703

Title: P () Delete
Name: BENSON, MICHAEL
Address: 7204 120 AVE NORTH
City-St-Zip: LARGO, FL 33773

Title: D () Delete
Name: TADDER, DAVE
Address: 7350 14TH STREET NE
City-St-Zip: ST. PETERSBURG, FL 33713

Title: VP () Delete
Name: ALMANN, BILL
Address: 9010 55 WAY
City-St-Zip: PINELLAS PARK, FL 33782

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: HAYWORTH, CHARLES R
Address: 1320 50TH AVENUE NE
City-St-Zip: ST. PETERSBURG, FL 33703

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: OALMANN, BILL
Address: 9010 55 WAY
City-St-Zip: PINELLAS PARK, FL 33782

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: CHARLES HAYWORTH

T

03/01/2005

Electronic Signature of Signing Officer or Director

Date