2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 10, 2005 8:00 am
Secretary of State
08-10-2005 90017 003 ****61.25

DOCUMENT # 706116

1. Entity Name
CHARLOTTE PLAYERS INC

Principal Place of Business	Mailing Address
1225 TAMIAMI TRAIL APT. B11 PT CHARLOTTE, FL 33953 US	P O BOX 494088 PT CHARLOTEE, FL 33949 US

J00660889

07072005 Chg-NP CR2E037 (10/03)

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 23-7087894 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WILLIAMS, HAL 2080 BASIN ST. PORT CHARLOTTE, FL 33952	Name: Lynne Ziegler Street Address (P.O. Box Number is Not Acceptable): 157 NE Concord City: Port Charlotte FL 33952

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D VALLIERE, PAUL 17424 CLOVER AVE. PORT CHARLOTTE, FL 33948	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS Resignato Lora 6183 Cromwell Street Englewood FL 34224	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DURKEE, RAY 3688 BROOKLYN AVE. PORT CHARLOTTE, FL 33952	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Kozenko Sharynn 2244 Hayworth Rd Port Charlotte FL 33952	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD STUART, DONALD 22427 DELHI AVE. PORT CHARLOTTE,	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Langdon Helen 118 SE Peckham Port Charlotte FL 33952	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HART, JOE 7257 PLUM TREE PUNTA GORDA, FL 33955	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Zipoy Ernestine 119 Hibiscus Dr Punta Gorda FL 33950	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TAYLOR, HARRY 21451 DEKALS AVE PORT CHARLOTTE, FL 33952	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP Harry Taylor 21451 Dekals Ave Port Charlotte FL 33952	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P WILLIAMS, HAL 2080 BASIN ST PORT CHARLOTTE, FL 33952	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Ziegler Lynne 157 NE Concord Port Charlotte FL 33952	☐ Change ☒ Addition

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: Lynne B. Ziegler 8/1/05 941-255-1022
SIGNATURE AND TYPED OR PRINTED NAME OF INCOMING OFFICER OR DIRECTOR — Date — Daytime Phone #

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ATTACHMENT
N06088 9

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CHARLOTTE PLAYERS INC

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Castro Janet 2925 Magdolina Dr Punta Gorda Fl 33950	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Dougan Marjorie 505 Medici Court Punta Gorda Fl 33950	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Jewell Audrey 5046 LaCosta Island CT Punta Gorda Fl 33950	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Van Gorp Donna 2466 Newbury St Port Charlotte Fl 33952	☐ Change	☒ Addition
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SIGNATURE: [signature] 8/1/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #