2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2009
Secretary of State

DOCUMENT# 708814

Entity Name: SANTA ROSA RESERVISTS, INC.

Current Principal Place of Business:

6409 FLEET AVE
MILTON, FL 32570 US

New Principal Place of Business:

Current Mailing Address:

6409 FLEET AVE
MILTON, FL 32570 US

New Mailing Address:

FEI Number: 70-8814670 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, F A
6401 FLEET AVE
MILTON, FL 32570 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: ST ( ) Delete
Name: SMITH, FA
Address: 6401 FLEET AVE
City-St-Zip: MILTON, FL 325703271

Title: D ( ) Delete
Name: DENNIS, RICHARD E
Address: 6437 ROBIE RD
City-St-Zip: MILTON, FL 32570

Title: VP ( ) Delete
Name: MURRAY, SUSAN
Address: 4458 TRICE RD
City-St-Zip: MILTON, FL 32571

Title: P ( ) Delete
Name: BISHOP, CHARLES W
Address: 8518 EL PASEO ST
City-St-Zip: NAVARRE, FL 32566

Title: D ( ) Delete
Name: FORBES, MALCOLM
Address: 6413 SYEAMORE ST
City-St-Zip: MILTON, FL 32570

Title: D ( ) Delete
Name: DODGE, JAMES N
Address: 6544 SELLER DR
City-St-Zip: MILTON, FL 32570

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SMITH, FA
Address: 6401 FLEET AVE
City-St-Zip: MILTON, FL 325703271

Title: T (X) Change ( ) Addition
Name: DENNIS, RICHARD E
Address: 6437 ROBIE RD
City-St-Zip: MILTON, FL 32570

Title: S (X) Change ( ) Addition
Name: WILLIAMS, RON SEC
Address: 5599 FOREST HILLS LANE
City-St-Zip: MILTON, FL 32570-779

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

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

Title: VP (X) Change ( ) Addition
Name: DODGE, JAMES N
Address: 6544 SELLER DR
City-St-Zip: MILTON, FL 32570

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: F A SMITH D 01/15/2009

Electronic Signature of Signing Officer or Director — Date