## 2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Mar 19, 2004 8:00 am **Secretary of State DOCUMENT # 713881** 1. Entity Name 03-19-2004 90069 017 \*\*\*\*61.25 TRAILER ESTATES SHUFFLEBOARD CLUB, INC. Principal Place of Business Mailing Address TRAILER ESTATES SHUFFLE BOARD T.E., BOX 5308 6521 ARIZONA BRADENTON FL 34281 24025684 **BRADENTON FL 34281** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State Applied For 4. FEI Number NO-T APPLICABLE Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LYONS, BILL Street Address (P.O. Box Number is Not Acceptable) 2004 OHIO PO BOX 6714 **BRADENTON FL 34281** Zip Code 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be П Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Addition TITLE Delete TITLE ☐ Change LYONS, BILL NAME NAME 204 OHIO, PO BOX 6717 STREET ADDRESS STREET ADDRESS **BRADENTON FL 34281** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change TITLE ☐ Addition BROWN, DOLORES NAME 1813 IOWA PO BOX 6728 STREET ADDRESS STREET ADDRESS **BRADENTON FL 34281** CITY-ST-ZIP CITY-ST-ZIP Delete Change Addition LEO, KWITOWSKI NAME NAME 1910 OHIO, PO BOX 6026 STREET ADDRESS STREET ADDRESS **BRADENTON FL 34281** CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE WALSH, LILLIAN NAME NAME 6604 KANSAS/PO BOX 6640 STREET ADDRESS STREET ADDRESS **BRADENTON FL** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition COWAN, MARY 1809 M.N.H/P O BOX 6174 STREET ADDRESS STREET ADDRESS BRADENTON FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition KENYON, TERESA NAME NAME 1704 MICHIGAN, PO BOX 6161 STREET ADDRESS STREET ADDRESS **BRADENTON FL 34281** CITY-ST-ZIP 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.

FILED