2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#715638

City-St-Zip:

WINTER HAVEN, FL 33880

FILED May 31, 2005 Secretary of State

Entity Name: FLORIDA GULF COAST PARALYZED VETERANS OF AMERICA, INC.

Current Principal Place of Business: New Principal Place of Business: 121 W 122ND AVENUE TAMPA, FL 33612 **Current Mailing Address: New Mailing Address:** 121 W 122ND AVENUE TAMPA, FL 33612 FEI Number: 23-7037565 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ANNIS, EARLE B JR. 2912 COUNTRY WOODS LN. PALM HARBOR, FL 34683 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete FARNUM, ANGUS, A., WEBBER, WAYNE Name:

Name: Address: 8785 56TH ST., N. Address: 1533 PELICAN PLACE City-St-Zip: PINELLAS PARK, FL City-St-Zip: PALM HARBOR, FL 34683 Title: VD () Delete Title: () Change () Addition Name: RYAN, WILLIAM W Name: Address: 795 WARREN ROAD Address: City-St-Zip: LUTZ, FL 33548 City-St-Zip: Title: () Delete Title: (X) Change () Addition RAETANO, JOSEPH Name: RAETANO, JOSEPH Name: 1157 SARAH COURT 1157 SARAH COURT Address: Address: City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: DUNEDIN, FL 34698 Title: SD (X) Delete Title: () Change () Addition Name: BULLOCK, DELREDGE B Name: Address: 123 4TH JVP STREET Address:

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.

City-St-Zip:

SIGNATURE: JOSEPH RAETANO VP 05/31/2005