

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 04, 2005
Secretary of State**

DOCUMENT# 719315

Entity Name: ENGLEWOOD JAYCEES, INC.

Current Principal Place of Business:

6430 ROSEWOOD DR.
ENGLEWOOD, FL 34224

New Principal Place of Business:

Current Mailing Address:

6430 ROSEWOOD DR.
ENGLEWOOD, FL 34224

New Mailing Address:

FEI Number: 59-2466856 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSH, CHARLES
6430 ROSWOODE DR.
ENGLEWOOD, FL 34224 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: D () Delete
Name: ALEXANDER, REBECCA
Address: 10324 GREENWAY AVE.
City-St-Zip: ENGLEWOOD, FL 34224

Title: D () Delete
Name: BUSH, TAMMY
Address: 6430 ROSEWOOD DR
City-St-Zip: ENGLEWOOD, FL 34224

Title: D () Delete
Name: HALSTEAD, BRYN
Address: 12038 KELLER
City-St-Zip: PORT CHARLOTTE, FL 34942

Title: D () Delete
Name: HALSTEAD, ERIN
Address: 12038 KELLER
City-St-Zip: PORT CHARLOTTE, FL 34942

Title: D () Delete
Name: BUSH, CHARLES
Address: 6430 ROSEWOOD DR.
City-St-Zip: ENGLEWOOD, FL 34224

Title: P () Delete
Name: STEFANI, EMILY
Address: .96 ROTONDA CIR
City-St-Zip: ROTONDA WEST, FL 34947

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: P (X) Change () Addition
Name: KRAMER, DAN
Address: 464
City-St-Zip: ENGLEWOOD, FL 34295

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: DAN KRAMER

Electronic Signature of Signing Officer or Director

P

03/04/2005

Date