


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2004 08:00 AM
Secretary of State

DOCUMENT # 721585 1. Entity Name CHRISTOPHER CLUB OF OCALA, INC.	
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Principal Place of Business 2301 N.E. 17 PLACE 101 OCALA, FL 34470	Mailing Address P.O. BOX 241 OCALA, FL 34478
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DO NOT WRITE IN THIS SPACE



01092004 No Chg-NP CR2E037 (10/03)

4. FEI Number 23-7329929	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KUNZMANN, FRANK
1890 NE 91ST PLACE
ANTHONY, FL 32617

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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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000066729 02/26/04-80028-004 61.25
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KUNZMANN, FRANK 1890 NE 81ST CT ANTHONY, FL 32617
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MILLAR, WALTER J 3938 SE 15TH STREET OCALA, FL 34471
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HORSWOOD, WILLIAM 2761 SW 98TH STREET RD OCALA, FL 34476
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PELEHATY, NICHOLAS 1921 SE 56TH COURT OCALA, FL 34471
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KUNZMANN, FRANK 1890 NE 81ST COURT ANTHONY, FL 32617
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NUETZI, MARK A 718 S.E. 24TH ST OCALA, FL 34471

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Frank Kunzmann (FRANK KUNZMANN, FR) 2-18-04 352-232-1190
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #