

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726285

FILED  
Jan 06, 2004  
Secretary of State

Entity Name: SUN 'N FUN CHAPTER 454 (EAA), INC.

## Current Principal Place of Business:

1248 SUNSET AVE.  
LAKELAND, FL 33801

## New Principal Place of Business:

6082 VELVET LOOP  
LAKELAND, FL 33811

## Current Mailing Address:

1248 SUNSET AVE.  
LAKELAND, FL 33801

## New Mailing Address:

6082 VELVET LOOP  
LAKELAND, FL 33811

FEI Number: 59-2771964

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MABRY, JEAN MR  
1248 SUNSET AVENUE  
LAKELAND, FL 33801 US

## Name and Address of New Registered Agent:

RHODES, GRACE E MS.  
6082 VELVET LOOP  
LAKELAND, FL 33811 US

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: GRACE E. RHODES

01/06/2004

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MABRY, JEAN MR  
Address: 1248 SUNSET AVE.  
City-St-Zip: LAKELAND, FL 33801

Title: VD ( ) Delete  
Name: THOMPSON, TOMMY MR  
Address: 1215 SCOTTSLAND DRIVE  
City-St-Zip: LAKELAND, FL 33813

Title: SD ( ) Delete  
Name: JANK, STEPHEN P MR  
Address: 197 WOODHALL DRIVE  
City-St-Zip: MULBERRY, FL 33860

Title: TD ( ) Delete  
Name: RHODES, GRACE E MS  
Address: 6082 VELVET LOOP  
City-St-Zip: LAKELAND, FL 33811

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change ( ) Addition  
Name: WARREN, MALCOLM MR  
Address: 4027 STONEHENGE RD.  
City-St-Zip: MULBERRY, FL 33860

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

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

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: GRACE E. RHODES

TD

01/06/2004

Electronic Signature of Signing Officer or Director

Date