2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #726448



FILED Feb 18, 2005 8:00 am Secretary of State

	R MCKAY POST NO N WARS OF THE UN			CAEAT			02-18-2005	90053 ()O'/ ****',	70.00
Principal Place of Business 7445 CHESTER MCKAY DRIVE NEW PORT RICHEY, FL 34655			Mailing Address 7445 CHESTER MCKAY DRIVE NEW PORT RICHEY, FL 34655			((247) (62(6)		, , , , , , , , , , , , , , , , , , ,	BIL 219(1 818)4 811	1/ //0 1 01 1401
2. Principal Place of Business 3. Mailing Address										
Suite, Apt. #, etc.		Su	Suite, Apt. #, etc.			01172005	Chg-NP	CR2E0	37 (10/03)	
City & State		Ci	City & State			4. FEI Number 59-6162				pplied For ot Applicable
Zip	Country	Zi	p	Countr	γ	5. Certificate of	of Status Desired	. X	\$8.75 Ad Fee Require	
<u> </u>	6. Name and Address of	of Current Register	ed Agent			7. Name and	Address of New R	egistered	Agent .	
WARD, STEVE E 10985 PEPPERTREE LN PORT RICHEY, FL 34668			<u> </u>	Name Street Addres	ss (P.O. Box Number	r is Not Acceptable	e)		···-·	
				7	City			FL	Zip Coc	ie
	named entity submits this st ions of registered agent.	tatement for the purp	cose of changing its re	egistered o	office or regis	stered agent, or both	n, in the State of Flo	orida. I am	familiar with	, and accept
SIGNATURE .	2 14 1 TU () 2	: 				\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	+1+1	-		•
	Characters have a maintain a facility of an									
. (*	Signature, typed or printed name of re	gistered agent and title if ap	plicable (NOTE:	Registered Ag	jent signature requ	jured when reinstating)	. *	DATE	e it	, *,
- 1°	Filing Fee is \$61.25 Due by May 1, 2005	7	9. Election Cam Trust Fund Co	paign Fina	ancing !	\$5.00 May Be Added to Fees	. N	lake chec	k payable triment of S	to '
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10. TITLE - NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee Is \$61.25 Due by May 1, 2005 OFFICER CMD WARD, STEVE E 10985 PEPPERTREE L PORT RICHEY, FL 346	RS AND DIRECTORS	9. Election Camp Trust Fund Co	paign Fina ntribution. 11TITLE NAME STREET A	ADDRESS	\$5.00 May Be Added to Fees	. M	lake chec ida Depai	k payable introduced the kind of S	to State
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indicated on this report or supplied with this litting 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 suppliemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the tecetiver or frustage 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: