

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 06, 2005 8:00 am
Secretary of State

04-06-2005 90101 044 ****70.00

DOCUMENT # 727176

1. Entity Name

SAN ANTONIO BOYS VILLAGE, INC.



Principal Place of Business

**BOYS VILLAGE DRIVE
P. O. BOX 505
SAN ANTONIO FL 33576**

Mailing Address

**BOYS VILLAGE DRIVE
P. O. BOX 505
SAN ANTONIO FL 33576**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



1st MOORE

CR2E037 (10/04)

4. FEI Number

59-1473991

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CAPODIFERRO, ALFRED MS
36119 CLINTON AVE
DADE CITY FL 33525**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE TSD
NAME REIDT, LARRY ☐ Delete
STREET ADDRESS 2250 CANFIELD DR
CITY-ST-ZIP SPRING HILL FL 34609

TITLE D
NAME WEST, DAVID REV. ☒ Delete
STREET ADDRESS 14121 19TH CT
CITY-ST-ZIP DADE CITY FL 33525

TITLE D
NAME SCHRADER, TOM ☐ Delete
STREET ADDRESS 12744 CURLEY RD
CITY-ST-ZIP SAN ANTONIO FL 33576

TITLE C
NAME STURWOLD, EARL ☐ Delete
STREET ADDRESS 37837 E. MERIDIAN, SUITE 311
CITY-ST-ZIP DADE CITY FL 33525

TITLE D
NAME COX, STEVE ☐ Delete
STREET ADDRESS 38301 MARTIN LUTHER KING BLVD
CITY-ST-ZIP DADE CITY FL 33525

TITLE D
NAME SUSTMAN, FRED ☐ Delete
STREET ADDRESS 5112 BEACON RD
CITY-ST-ZIP PALMETTO FL 34250-0069

TITLE D
NAME Sessa, Barbara ☐ Change ☒ Addition
STREET ADDRESS 2250 Canfield Dr.
CITY-ST-ZIP Spring Hill, FL 34609

TITLE D
NAME Collura, Frank Joe ☐ Change ☒ Addition
STREET ADDRESS P.O. Box 281
CITY-ST-ZIP Dade City, FL 33526-0281

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Secretary/Treasurer

2-10-05

352-567-1843

Date

Daytime Phone #