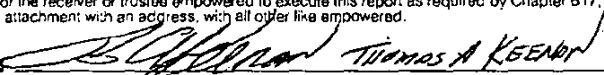


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2005 8:00 am
Secretary of State

03-07-2005 90281 030 ****61.25

DOCUMENT # 730451					
1. Entity Name FLORIDA LIVE STEAMERS AND RAILROADERS, INC.					
Principal Place of Business 14043 S. HWY 12 BRISTOL, FL 32321			Mailing Address 14043 NW CR 12 BRISTOL, FL 32321-0311 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
4. FEI Number 59-2484328				Applied For Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KEENAN, THOMAS A 14043 S. HWY 12 BRISTOL, FL 32321			7. Name and Address of New Registered Agent 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 reappointing) DATE _____					
Filing 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	
Version 07-2004					
10. OFFICERS AND DIRECTORS					
TITLE	P	☒ Delete			
NAME	BOOTS, JOHN				
STREET ADDRESS	P.O. BOX 41				
CITY-ST-ZIP	CANDLER, FL 32111				
TITLE	VP	☐ Delete			
NAME	BOND, FOSTER				
STREET ADDRESS	700 AVE. E, SE				
CITY-ST-ZIP	WINTER HAVEN, FL 33880				
TITLE	S	☐ Delete			
NAME	LAIRD (LARRY) H. A.				
STREET ADDRESS	688 ATTAPULGAS RD.				
CITY-ST-ZIP	ATTAPULGUS, GA 317159753				
TITLE	T	☐ Delete			
NAME	SMITH, JOAN				
STREET ADDRESS	9111 ERIE LANE				
CITY-ST-ZIP	PARRISH, FL 342199049				
TITLE	D	☐ Delete			
NAME	BOYCE, LARRY				
STREET ADDRESS	16930 NE 31 LN				
CITY-ST-ZIP	WILLISTON, FL 32696				
TITLE	D	☒ Delete			
NAME	SMITH, LAWRENCE H				
STREET ADDRESS	9111 ERIE LANE				
CITY-ST-ZIP	PARRISH, FL 342199049				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE	P	☒ Change ☐ Addition			
NAME	Phil Paxton				
STREET ADDRESS	6333 NE 120 ST				
CITY-ST-ZIP	OKEECHOBEE FL 34972				
TITLE		☐ Change ☐ Addition			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE		☐ Change ☐ Addition			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE		☐ Change ☐ Addition			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	D	☒ Change ☐ Addition			
NAME	Ray LOCKWOOD				
STREET ADDRESS	253 VIA HAVARRE				
CITY-ST-ZIP	MERRITT ISLAND FL 32953				
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 817, 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: 		3/3/5 850-643-5235			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #			