## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **FILED** Apr 04, 2005 8:00 am Secretary of State 04-04-2005 90051 006 \*\*\*\*61.25

DOCUMENT # 732423  1. Entity Name SEMINOLE COMMUNITY VOLUNTEER PROGRAM, INC.							0-	4-04-20	005 900:	51 006 ***	**61.25	
Principal Place 100 WELDON SANFORD, FL	Address DX 951636 MARY, FL 32795-1636 US											
2. Principal Place of Business		3. Mailin	3. Mailing Address									11  11  11  11  11  11  11  11  11  1
Suite, Apt. #, etc.		Suite, Apt. #, etc.			•		04012005	Chg-	NP	CR2E	037 (10/03)	
City & State		City & State				4. FEI Number 59-1605609					11	Applied For Not Applicable
Zip	Country	Zíp		Cou	intry		5. Certificate o	of Statu	s Desired		\$8.75 A	
		Registered	Agent				7. Name and A	Addres	s of New	Registere	d Agent	
205 NORT	DYCAS & CO., P.A. H ELM AVE. I, FL 32771				Name Street Ad	ddress (I	P.O. Box Number	r is Not	Acceptal	ole)		
					City				-	F	Zip Co	de
	named entity submits this statement for ions of registered agent.	r the purpo	se of changing its	registere	ed office or	register	ed agent, or both	n, in the	State of	Florida. I a	m familiar with	n, and accept
SIGNATURE												
		and tide it appli	cable. (NOT)	E: Registere:	o Apent signatu	ure required	when reinstating)			DAT	Ł	
	Signature, typed or printed name of registered agent a signature, typed or printed name of registered agent a signature, typed by May 1, 2005	ало ше и врри	9. Election Car Trust Fund (	mpaign F	inancing	ure required	\$5.00 May Be Added to Fees	9	FI	Make ch	eck payable partment of	
10	Filing Fee is \$61.25 Due by May 1, 2005		9. Election Car	mpaign F Contributi	inancing ion.		\$5.00 May Be Added to Fees			Make ch orida Der	eck payable partment of	State
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Filing Fee Is \$61.25 Due by May 1, 2005  OFFICERS AND DIF PD KING, WILLIE K SR 141 BETHUNE CIRCLE SANFORD, FL 32771  VD RUSSELL, PATRICIA 231 LAKE GRIFFIN CIRCLE CASSELBERRY, FL 32707  SD EVANS, ANNIE 1000 ROBERTA AVENUE ORLANDO, FL 32825  TD MILLER, TED 115 BERWYN ROAD ORLANDO, FL 32806  D MCCARTHY, BOB		9. Election Car Trust Fund C	TIPLE NAMES TREE CITY TITLE TREE CITY TI	E HE	DKING DRUST CAPPUSOT MIST ME	\$5.00 May Be Added to Fees ADDITIONS/CHA  Willie Bethur ford, F  Sell, Pat Lake Constant Carton Robert Conduction Robert Conduction Robert Conduction Robert Control Carton Carto	K RE FL RE	TO OFFICE S- Circle 3277  ff. 6 2 328  d. 328	Make chiorida Dep CERS AND Curel 2707	Change  Change	State IN 10 IN 10 IN Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Filing Fee is \$61.25 Due by May 1, 2005  OFFICERS AND DIF PD KING, WILLIE K SR 141 BETHUNE CIRCLE SANFORD, FL 32771  VD RUSSELL, PATRICIA 231 LAKE GRIFFIN CIRCLE CASSELBERRY, FL 32707  SD EVANS, ANNIE 1000 ROBERTA AVENUE ORLANDO, FL 32825  TD MILLER, TED 115 BERWYN ROAD ORLANDO, FL 32806  D MCCARTHY, BOB 1082 BLACK ACRE TERR WINTER SPRINGS, FL 32708  D HUGHES, BARBARA		9. Election Car Trust Fund C	TIPLE NAME STREET CITY TITLE NAME STREET CITY NAME STREET CITY TITLE NAME STREET CITY NAME STREET CITY TITLE NAME STREET CITY NA	E E E E E E E E E E E E E E E E E E E	DKING DRIGGE DE TOLENGE CONT	\$5.00 May Be Added to Fees Added to Fees ADDITIONS/CHA  Dille Bethur ford, F  Lake C L	ANGES K	TO OFFICE ST. Circle 3277  Ff. a  A  A  A  A  A  A  A  A  A  A  A  A  A	Make chrorida Dep CERS AND Carella 2707	Change  Change  Change	State IN 10 IN 10 IN Addition
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ring according that the short receiver or trustee with this report as the uniformation stated in section 119.07(3)(1). Florida Statutes, I ruffier 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 eath; 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.

## ATTACHMENT

## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 732423  1. Entity Name SEMINOLE COMMUNITY VOLUNTEER PROGRAM, INC.							ي).	(19	5		
Principal Place of Business 100 WELDON BLVD., BLDG. 64 SANFORD, FL 32773 US Mailing Address P 0 B0X 951636 LAKE MARY, FL 32795				US		4	00H+	+ ' '			
2. Principal P	lace of Business	3. Mailing Address					Leave-	ana. *			
Suite, Apt. #, etc.		Suite, Apt. #, etc.				04012005 C	hg-NP	CR2E0	37 (10/03)		
City & State	9	City & State			4. FEI Number 59-16056	09			plied For t Applicable		
Zip	Country	Zip	Coun			5. Certificate of S	\$8.75 Add Fee Require	75 Additional Required			
	6. Name and Address of Current	Registered Agent		Name	_	_ 7Name and Ad	dress of New	Registered	Agent		
GREENE, DYCAS & CO., P.A. 205 NORTH ELM AVE. SANFORD, FL 32771				Street Address (P.O. Box Number is Not Acceptable)							
SANFORD	, FL 32111										
				City				FL	Zip Code		
	named entity submits this statement fo ions of registered agent.	r the purpose of changing	its register	ed office or re	egister	ed agent, or both, i	n the State of F	florida. I am	familiar with,	and accept	
SIGNATURE .	Signature, typed or printed name of registered agent	and little if applicable. (N	OTE: Registere	d Agent signature	tequired	when reinstating)		DATE			
	Filing Fee is \$61.25 Due by May 1, 2005	9. Election C Trust Fund	ampaign f d Contribut		]	\$5.00 May Be Added to Fees			k payable to		
10.	OFFICERS AND OIL		11.		5 D	ADDITIONS/CHANG	SES TO OFFIC	ERS AND DI			
NAME STREET ADDRESS CITY-ST-ZIP	KING, WILLIE K SR 141 BETHUNE CIRCLE SANFORD, FL 32771	☐ Defete		IE EET ADDRESS '-ST-ZIP	3411	Stone sthrow,	Johns	Loop	□ Change	Addition	
TITLE	VD VD	Delete	· tur		<u>+e</u>	ethrow,	ق ۲۳	32.190	☐ Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP	RUSSELL, PATRICIA 231 LAKE GRIFFIN CIRCLE CASSELBERRY, FL 32707			EET ADORESS '-ST-ZIP							
TITLE NAME	SD EVANS, ANNIE	Delete	TITL	E	•	· , ,			☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP	1000 ROBERTA AVENUE ORLANDO, FL 32825	·	STRI	EET ADORESS '-ST-ZIP		. ساد د درسی		· · · · · · · · · · · · · · · · · · ·			
TITLE	TD MILLER, TED	☐ Delete	TITL						☐ Change	☐ Addition	
STREET ADORESS CITY-ST-ZIP	115 BERWYN ROAD ORLANDO, FL 32806		STR	EET ADDRESS '-ST-ZIP							
TITLE	D MCCARTHY, BOB	☐ Delete	TITL	1					☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP	1082 BLACK ACRE TERR WINTER SPRINGS, FL 32708		STR	EET ADDRESS 7-ST-ZIP							
TITLE NAME	D HUGHES, BARBARA	☐ Delete	TITL	I .					Change	Addition	
STREET ADDRESS CITY-ST-ZIP	250 W COUNTY HOME RD. SANFORD, FL 32773		STR	EET ADDRESS 7-ST-ZIP							
indicated of the co	certify that the information supplied with I on this report or supplemental report is reporation or the receiver or trustee emp , or on an attachment with an address.	s true and accurate and the	at my signa	ture shall hav	ve the :	same legal effect a:	s if made unde	r oath: that I	am an officer	or director	
SIGNAT	URE: JAKA	PRINTED NAME OF SIGNING OFFICE	eck	/ Yor	,	4/1/0	5 Al	17 3c	23 4/	44/1	