

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90313 040 ****61.25

DOCUMENT # 750024

1. Entity Name

ANN STURGEON MEMORIAL ROSE GARDEN FUND, INC.



Principal Place of Business

13401 INDIAN ROCKS ROAD
LARGO FL 33774
US

Mailing Address

13401 INDIAN ROCKS ROAD
LARGO FL 33774
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

14013101



MOORE

CR2E037 (11/03)

4. FEI Number

NO-T APPLICABLE

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

MC MANUS, R. BRUCE
79 OVERBROOK BLVD.
LARGO FL 33540

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, 2004

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

TITLE TD
NAME CONNELL, DONNA L
STREET ADDRESS 11509108TH PL NORTH
CITY-ST-ZIP LARGO FL 33778 ☐ Delete

TITLE S
NAME TORPEY, DOROTHEE
STREET ADDRESS 3244 HILARY CIRCLE
CITY-ST-ZIP PALM HARBOR FL 34684 ☒ Delete

TITLE PD
NAME WILEY, BEN R
STREET ADDRESS 3911 MCKAY CREEK
CITY-ST-ZIP LARGO FL ☒ Delete

TITLE D
NAME FESSENBECKER, KATHY
STREET ADDRESS 3105 SWAN LN
CITY-ST-ZIP SAFETY HARBOR FL ☒ Delete

TITLE D
NAME REISER, KARL
STREET ADDRESS 2904 SHERWOOD RD.
CITY-ST-ZIP COLUMBUS OH ☒ Delete

TITLE D
NAME ROSATI, CARL A.
STREET ADDRESS 2391 NURSERY ROAD
CITY-ST-ZIP CLEARWATER FL ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P
NAME Roger LaPlume
STREET ADDRESS 1400 SAN REMO
CITY-ST-ZIP CLEARWATER, FL 33756 ☐ 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

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:

Donna L Connell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DONNA CONNELL

4/26/04

727-595-2914

Date

Daytime Phone #