

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751304

FILED
Apr 27, 2005
Secretary of State

Entity Name: ARTHUR BORING CIVIC CENTER, INC.

Current Principal Place of Business:

2202 W REYNOLDS ST
PLANT CITY, FL 33567 US

New Principal Place of Business:

<UNUSED>
PLANT CITY, FL 33567 US

Current Mailing Address:

P.O. DRAWER 1869
PLANT CITY, FL 335641869 US

New Mailing Address:

FEI Number: 59-6151219 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REDMAN, JAMES L.
212 N. COLLINS STREET SUITE 2
PLANT CITY, FL 33566 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NEWSOME, JOE
Address: 3405 N. WILDER RD
City-St-Zip: PLANT CITY, FL 33565

Title: D () Delete
Name: ROLLYSON, ROLLY
Address: P O BOX 1536
City-St-Zip: PLANT CITY, FL 33564

Title: VP () Delete
Name: PAGE, JOHNNY DEAN
Address: 3502 CHARLIE TAYLOR ROAD
City-St-Zip: PLANT CITY, FL 33564

Title: PD () Delete
Name: LUCAS, KENNETH
Address: PO BOX 824
City-St-Zip: VALRICO, FL 33595

Title: TD () Delete
Name: SPARKMAN, MIKE
Address: 2106 GOLFWAY DR.
City-St-Zip: PLANT CITY, FL 33567

Title: D () Delete
Name: REDMAN, JAMES L.
Address: 121 N COLLINS STREET
City-St-Zip: PLANT CITY, FL 33566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KENNETH LUCAS

P

04/27/2005

Electronic Signature of Signing Officer or Director

Date