


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2005 8:00 am
Secretary of State

01-18-2005 90049 022 ****61.25

DOCUMENT # 751320 1. Entity Name THE WITHLACOOCHEE ROCKHOUNDS, INCORPORATED	
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Principal Place of Business %SENIOR CITIZENS CENTER CAVEHILL ROAD SPRING HILL, FL 34606	Mailing Address 2364 SCENIC HILL DR SPRING HILL, FL 34606 US
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2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address % RUTH BILICA Suite, Apt. #, etc. 2372 ROLLING VIEW DR City & State SPRING HILL, FL Zip 34606
Country HERNANDO	

40002429



01102005 Chg-NP CR2E037 (10/03)

4. FEI Number 59-2404623	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent BILICA, RUTH G 2364 SCENIC HILL DR SPRING HILL, FL 34606	
7. Name and Address of New Registered Agent Name RUTH G. BILICA Street Address (P.O. Box Number is Not Acceptable) 2372 ROLLING VIEW DR. City SPRING HILL, FL Zip Code FL 34606	

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

**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**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BILICA, RUTH 2364 SCENIC HILL DR SPRING HILL, FL 346067012 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition BILICA, RUTH 2372 ROLLING VIEW DR SPRING HILL, FL 34606-7234
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GOTTSMAN, ROBERT 19584 MANECKE RD BROOKSVILLE, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JOHNSON, GERALD 387 MARTINA DR. SPRING HILL, FL 34609 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete GOTTSMAN, JOYCE 19584 MANECKE RD BROOKSVILLE, FL 34601	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input type="checkbox"/> Addition STEAD, AUDREY 4165 GLADE RD. SPRING HILL, FL. 34606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input type="checkbox"/> Delete BARKER, FLORA 5650 W CROSSMOOR PL LECANTO, FL 34461	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete BILICA, HARRY 2364 SCENIC HILL DR SPRING HILL, FL 346067012	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition BILICA, HARRY 2372 ROLLING VIEW DR. SPRING HILL, FL 34606-7234

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: Ruth G. Billica - RUTH G. BILICA

1/14/05 (352) 688-1406

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #