

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760271

FILED  
Feb 16, 2005  
Secretary of State

Entity Name: ARC/PASCO FOUNDATION, INC.

## Current Principal Place of Business:

6645 RIDGE ROAD, SUITE 1  
PT. RICHEY, FL 34668

## New Principal Place of Business:

7027 U. S. HWY 19  
NEW PORT RICHEY, FL 34652

## Current Mailing Address:

6645 RIDGE ROAD, SUITE 1  
PT. RICHEY, FL 34668

## New Mailing Address:

7027 U. S. HWY 19  
NEW PORT RICHEY, FL 34652

FEI Number: 59-2261813

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

TORRENCE, ALFRED W. JR.  
6645 RIDGE ROAD, SUITE 1  
PORT RICHEY, FL 34668 US

## Name and Address of New Registered Agent:

LAURINO, EMILE  
7027 U. S. HWY 19  
NEW PORT RICHEY, FL 34652 US

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: EMILE LAURINO

02/16/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: SDP (X) Delete  
Name: TORRENCE, ALFRED W.,  
Address: 6645 RIDGE ROAD  
City-St-Zip: PT. RICHEY, FL

Title: D ( ) Delete  
Name: LAURINO, EMILE  
Address: 7027 US 19  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D ( ) Delete  
Name: TROY, GORDON  
Address: 5828 CORK WOOD CT  
City-St-Zip: HOLIDAY, FL 34690

## 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:

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: EMILE LAURINO

D

02/16/2005

Electronic Signature of Signing Officer or Director

Date