2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762577

FILED May 06, 2008 Secretary of State

Entity Name: PAN AM/NAT'L RETIREES CLUB OF NORTH CENTRAL FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 225 S. STARLIT PT 604 SW PHILLIPS CIRCLE INVERNESS, FL 34450 LAKE CITY, FL 32024-371 US US **Current Mailing Address: New Mailing Address:** 604 SW PHILLIPS CIRCLE 225 STARLIT PT INVERNESS, FL 34450 US LAKE CITY, FL 320243717 US FEI Number: 59-2175372 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROBERTS, ROBERT A BEARD, JAMES B 604 SW PHILLIPS CIRCLE 225 S. STARLIT PT IVERNESS, FL 34450 US LAKE CITY, FL 320243717 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: JAMES B. BEARD 05/06/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition ROBERTS, ROBERT A BEARD, JAMES B Name: Name: 225 S. STARLIT PT Address: 604 SW PHILLIPS CIRCLE Address: City-St-Zip: INVERNESS, FL 344501808 City-St-Zip: LAKE CITY, FL 32024 US Title: () Delete Title: (X) Change () Addition LOGAN, MILLER S Name: ROBERTS, ROBERT A Name: Address: 1063 YORK WAY Address: 225 S STARLIT POINT City-St-Zip: PORT ORANGE, FL 321294109 City-St-Zip: INVERNESS, FL 344501808 US Title: () Delete Title: () Change () Addition WILLARD, MARQUIS R Name: Name: 431 MAPLE TREE DR., APT. FF109 Address: Address: City-St-Zip: ALTOONA, FL 327029025 City-St-Zip: Title: () Delete Title: () Change () Addition Name: MILLION, GEORGE W Name: 221 SE 54TH AVE Address: Address: City-St-Zip: OCALA, FL 344713466 City-St-Zip: Title: () Delete Title: () Change () Addition SISTERUNK, WILLIAM Name: Name: RT 3 BOX 1995 Address: Address: LAKE CITY, FL 320247435 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition FERNANDEZ, JOHN A Name: Name: 6300 HIDDEN DALE AVE Address: Address: ORLANDO, FL 328194114 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: WILLARD R MARQUIS TRES 05/06/2008