


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 27, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 765130</b>	
1. Entity Name PENSACOLA FIVE FLAGS ROTARY, INC.	

Principal Place of Business 304 W. CERVANTES ST PENSACOLA, FL 32501 US	Mailing Address P O BOX 17012 PENSACOLA, FL 32522 US
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**DO NOT WRITE IN THIS SPACE**

01202005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-2262766	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  RADOMINSKI, DIANNA 304 W CERVANTES ST PENSACOLA, FL 32501
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**DO NOT WRITE  
IN THIS SPACE**

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 Dianna Radomski DATE 1-24-05  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25  
Due by May 1, 2005**

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**  
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RITCHIE, WALTER J PO BOX 13401 PENSACOLA, FL 32501
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD SHUSTER, ROBERT W 111 N. BAYLOR ST PENSACOLA, FL 32501
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD NOBLE, WILLIAM G 900 N. 12TH AVE. PENSACOLA, FL 32501
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC RADOMINSKI, DIANNA PO BOX 17012 PENSACOLA, FL 32501
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Dianna Radomski DATE 1-24-05 DAYTIME PHONE # 8504348123  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR