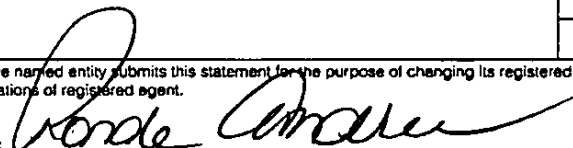


2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT.

FILED
May 02, 2005 8:00 am
Secretary of State

03-30-2005 90036 021 ****61.25

DOCUMENT # 766947 1. Entity Name MELROSE BUSINESS AND COMMUNITY ASSOCIATION, INC.					
Principal Place of Business PO BOX 1301, SR 21 MELROSE, FL 32666-1301			Mailing Address PO BOX 1301, SR 21 MELROSE, FL 32666-1301		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country			
03082005 Chg-NP CR2E037 (10/03)				4. FEI Number 59-2350443	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent ANDREWS, RONDA 25501 NE SR 26 MELROSE, FL 32666			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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  DATE 3-25-05 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)					
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	TD ANDREWS, RONDA 25501 NE SR 26 MELROSE, FL 32666	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	NP Talarico, Sandra PO BOX 321 103 Highlands Court Melrose FL 32666	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RUDD, DOUGLAS L 6240 PAYNE RD KEYSTONE HEIGHTS, FL 32656	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Miller, Myron PO BOX 1174 5411 NE 255th Drive Melrose FL 32666	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SOKOL, PETER 6118 HAMPTON ST MELROSE, FL 32666	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD O'BRYAN, ED P.O. BOX 1801 MELROSE, FL 32666	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS SMITH, WALTON 6435 LATENSTRING CT. MELROSE, FL 32666	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CORR, NATALIE PO BOX 14656 6202 Hampton ST MELROSE, FL 32666	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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: 			Date 3/25/05 Daytime Phone # 352 475 1413		