2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2005
Secretary of State

DOCUMENT# 771151

Entity Name: CENTRAL FLORIDA CHESS CLUB, INC.

Current Principal Place of Business:

921 THISTLE LANE
MAITLAND, FL 32751

New Principal Place of Business:

921 N. THISTLE LANE
MAITLAND, FL 32751

Current Mailing Address:

921 THISTLE LANE
MAITLAND, FL 32751

New Mailing Address:

921 N. THISTLE LANE
MAITLAND, FL 32751

FEI Number: 59-2378398 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRYANT, GARY
3018 LANDTREE PL.
ORLANDO, FL 32812 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: SD ( ) Delete
Name: LEE, JOHATHAN
Address: 110 LAMORAK LANE
City-St-Zip: MAITLAND, FL 32751

Title: D ( ) Delete
Name: HARGETT, PAUL
Address: 5807 WILLOW BLVD CT.
City-St-Zip: ORLANDO, FL

Title: TD ( ) Delete
Name: LERMAN, HARVEY,
Address: 921 THISTLE LANE
City-St-Zip: MAITLAND, FL

Title: D ( ) Delete
Name: LEAVITT, MICHAEL
Address: 182 SHADOWBAY BLVD
City-St-Zip: LONGWOOD, FL 32779

Title: PD ( ) Delete
Name: STORCH, LARRY
Address: 5430 BIRCHBEAD LOOP
City-St-Zip: OVIEDO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: HARGETT, PAUL
Address: 4892 CHEROKEE ROSE DR.
City-St-Zip: ORLANDO, FL 32808

Title: TD (X) Change ( ) Addition
Name: LERMAN, HARVEY,
Address: 921 N. THISTLE LANE
City-St-Zip: MAITLAND, FL 32751

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change ( ) Addition
Name: STORCH, LARRY
Address: 5430 BIRCHBEAD LOOP
City-St-Zip: OVIEDO, FL 32765

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: HARVEY N. LERMAN T 02/08/2005

Electronic Signature of Signing Officer or Director — Date