

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G80210

FILED  
May 03, 2005  
Secretary of State

Entity Name: THE REGENCY ORGANIZATION, INC.

## Current Principal Place of Business:

2536 COUNTRYSIDE BLVD  
STE 250  
CLEARWATER, FL 33763 US

## New Principal Place of Business:

3030 N. ROCKY POINT DRIVE WEST,  
SUITE 350  
TAMPA, FL 33607 US

## Current Mailing Address:

24025 PARK SORRENTO  
SUITE 400  
CALABASAS, CA 91302 US

## New Mailing Address:

FEI Number: 59-2367217      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GARRITY, JOHN  
Address: 2536 COUNTRYSIDE BLVD STE 250  
City-St-Zip: CLEARWATER, FL 33763

Title: V ( ) Delete  
Name: WRIGHT, WILLIAM  
Address: 255 PINE AVENUE NORTH  
City-St-Zip: OLDSMAR, FL 34677

Title: SD ( ) Delete  
Name: GECKLE, TIMOTHY J  
Address: 24025 PARK SORRENTO, SUITE 400  
City-St-Zip: CALABASAS, CA 91302

Title: AT ( ) Delete  
Name: MENTCH, RENE L  
Address: 24025 PARK SORRENTO, SUITE 400  
City-St-Zip: CALABASAS, CA 91302

Title: AT ( ) Delete  
Name: BRITTON, HARRIET A  
Address: 24025 PARK SORRENTO, #400  
City-St-Zip: CALABASAS, CA 91302

Title: T ( ) Delete  
Name: LOWE, CATHEY S  
Address: 24025 PARK SORRENTO, SUITE 400  
City-St-Zip: CALABASAS, CA 91302

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: NICHOLSON, LARRY T  
Address: 3030 N. ROCKY POINT DRIVE WEST, SUITE 350  
City-St-Zip: TAMPA, FL 33607

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

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HARRIET A. BRITTON

AT

05/03/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date