

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008103

FILED
Jun 07, 2004
Secretary of State**Entity Name:** TROOP/PACK 806 - B.S.A., INC.**Current Principal Place of Business:**6701 SUNSET DR., STE. 104
MIAMI, FL 33143**New Principal Place of Business:****Current Mailing Address:**6701 SUNSET DR., STE. 104
MIAMI, FL 33143**New Mailing Address:****FEI Number:** 65-1060305**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PRICE, MAX R
C/O SOLMS & PRICE, P.A.
6701 SUNSET DR., STE. 104
MIAMI, FL 33143 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: D () Delete
Name: LEE, STEVE
Address: 15177 SW 102 PL
City-St-Zip: MIAMI, FL 33157

Title: PD () Delete
Name: PRICE, MAX R
Address: 8270 SW 180 ST
City-St-Zip: MIAMI, FL 33157

Title: TD () Delete
Name: PRICE, LISA H
Address: 8270 SW 180 ST
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: DE LA FE, ERNESTO
Address: 6601 SW 116 ST
City-St-Zip: MIAMI, FL 33156

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: LEE, STEVE
Address: 15177 SW 102 PL
City-St-Zip: MIAMI, FL 33157

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

Title: D (X) Change () Addition
Name: YABOR, RICK L
Address: 8820 SW 113 PL, CIRCLE EAST
City-St-Zip: MIAMI, FL 33176

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

Title: TD () Change (X) Addition
Name: PARRA, MARIO
Address: 8100 SW 137 STREET
City-St-Zip: MIAMI, FL 33158

Title: D () Change (X) Addition
Name: GREENE, PHIL
Address: 7570 SW 148 TERRACE
City-St-Zip: MIAMI, FL 33158

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: MAX R. PRICE

PD

06/07/2004

Electronic Signature of Signing Officer or Director

Date