

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008137

FILED
Jul 26, 2005
Secretary of State

Entity Name: COUNTRYSIDE JR. COUGARS, INC.

Current Principal Place of Business:

3060 MCMULLEN BOOTH RD.
CLEARWATER, FL 33759

New Principal Place of Business:

Current Mailing Address:

PO BOX 16934
CLEARWATER, FL 33766

New Mailing Address:

FEI Number: 59-3685947 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SCHROEDER, JOHN JR
2729 11TH CT.
PALM HARBOR, FL 34684 US

Name and Address of New Registered Agent:

DAVID, WILLIAMS
3060 MCMULLEN BOOTH RD
CLEARWATER, FL 33759 US

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: DAVID WILLIAMS

07/26/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCHROEDER, JOHN JR
Address: 2729 11TH CT.
City-St-Zip: PALM HARBOR, FL 34684

Title: SD () Delete
Name: SMITH-KHAN, CHERYL
Address: 1968 BAYSHORE BLVD.
City-St-Zip: DUNEDIN, FL 34698

Title: D () Delete
Name: REAVES, KEVIN
Address: 2188 ELM ST., #1105
City-St-Zip: DUNEDIN, FL 34698

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WILLIAMS, DAVID
Address: 3060 MCMULLEN BOOTH RD
City-St-Zip: CLEARWATER, FL 33759

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

SIGNATURE: KEVIN REAVES

D

07/26/2005

Electronic Signature of Signing Officer or Director

Date