

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005209

FILED
May 11, 2005
Secretary of State

Entity Name: FRIENDS OF TAYLOR COUNTY SCOUTING FOUNDATION, INC.

Current Principal Place of Business:

112 W. GREEN ST.
PERRY, FL 32347

New Principal Place of Business:

115 W. BAY ST.
PERRY, FL 32347

Current Mailing Address:

112 W. GREEN ST.
PERRY, FL 32347

New Mailing Address:

115 W. BAY ST.
PERRY, FL 32347

FEI Number: 48-1300353 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:

BLUE, WILLIAM W
112 W. GREEN ST.
PERRY, FL 32347 US

Name and Address of New Registered Agent:

BLUE, WILLIAM W
115 W. BAY ST.
PERRY, FL 32347 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: _____

05/11/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ADAMS, DAVID
Address: 109 RIDGE RD.
City-St-Zip: PERRY, FL 32347

Title: SD () Delete
Name: BLUE, WILLIAM W
Address: 112 W. GREEN ST.
City-St-Zip: PERRY, FL 32347

Title: TD () Delete
Name: SUNDERLAND, JOHN
Address: GREEN FARM RD.
City-St-Zip: PERRY, FL 32347

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: BLUE, WILLIAM W
Address: 115 W. BAY ST.
City-St-Zip: PERRY, FL 32347

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: WILLIAM W. BLUE

RA

05/11/2005

Electronic Signature of Signing Officer or Director

Date