## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **FILED** Apr 18, 2005 08:00 AM

1, Entity Nam	MENT # N01000007	سه د په د			Secretary	y of State		
996 EAST PI	e of Business LANT STREET DEN, FL :34787	Mailing Address PO BOX 770308 WINTER GARDEN, FL 34777-0	308					
		· · · · · ·	, <del>*</del>					
		-	02072005 No Chs	3-NP CR28	E037 (10/D3)			
	O NOT WRITE	CE	4. FEI Number 45-0474652		Applied For Not Applicable			
	and the same of the same		±	5. Certificate of Status	Desired	\$8.75 Additional Fee Required		
	6. Name and Address of Current R	egistered Agent				, , , , , , , , , , , , , , , , , , , ,		
1031 WES SUITE 160	HADLEY, P.A. ST MORSE BOULEVARD O PARK, FL 32789	DO NOT WRITE IN THIS SPACE						
	named entity submits this statement for	the purpose of changing its register	ed office or registe	red agent, or both, in the	State of Florida. I a	m familiar with, and accept		
the obligations of registered agent.  SIGNATURE								
0,01,011,011,01	Signature typedic printed name of registered agent an	d the flappicable. (NOTE, Registere	d Agent signatur¢ require — → —	d when reinstating)	- DATE			
	Filing Fee is \$61.25 Due by May 1, 2005	Election Campaign Finar Trust Fund Contribution.		.00 May Be led to Fees				
10.	OFFICERS AND D	IRECTORS	j					
TITLE RAME STREET ADDRESS CITY-ST-ZIP	D DELOACH, THOMAS C 996 EAST PLANT STREET WINTER GARDEN, FL 34787			na)	U860003118	48 2-008 61,25		
NTLE NAME STREET ADDRESS CITY ST ZIP	D HOLLAND, R S 996 EAST PLANT STREET WINTER GARDEN, FL 34787	F# 3.4		ידע	ւս, ողանլ			
ITILE  EAGLE  STREET ADDRESS  CITY ST ZIP	D CLARK, JAMES L 996 EAST PLANT STREET WINTER GARDEN, FL 34787			DO NO	T WRIT	r <b>E</b>		
TITLE FAMIE STREET ADDRESS CITY ST ZIP				IN THI	S SPAC	E		
NAME STREET ADDRESS								

12. Thereby certify that the information supplied with this filling does not qualify 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 signature shall have the same legal effect as it 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

C1	Λ·NI	ATI	ID	⊏.

TITLE NAME STREET ADDRESS CITY ST ZIP

SIGNATURE: R.S. Holland SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/13/05

407-656-1553