2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001831

Entity Name: TRI-COUNTY WOODTURNERS INC.

FILED Jan 06, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2118 SALISBURY COURT 101 LUTZ LAKE-FERN ROAD WEST

PALM HARBOR, FL 34683 LUTZ, FL 33548

Current Mailing Address: New Mailing Address:

2118 SALISBURY COURT 16641 VALLELY DR. PALM HARBOR, FL 34683 TAMPA, FL 33618

FEI Number: 04-3636164 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CASACELI, ROBERTA G WILEY, TIMOTHY A
2118 SALISBURY COURT 16641 VALLELY DR.
PALM HARBOR, FL 34683 US TAMPA, FL 33618 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: TIMOTHY A. WILEY 01/06/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PRES () Delete Title: PRES (X) Change () Addition

 Name:
 CASACELI, EDMUND E
 Name:
 SMITH, JIM

 Address:
 2118 SALISBURY COURT
 Address:
 1436 29TH AVE N.

City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: ST.PETERSBURG, FL 33704

Title: SD () Delete Title: SEC (X) Change () Addition Name: CASACELI, ROBERTA Name: WILEY, TIMOTHY

 Address:
 2118 SALISBURY CT
 Address:
 16641 VALLELY DR.

 City-St-Zip:
 PALM HARBOR, FL 34683
 City-St-Zip:
 TAMPA, FL 33618

Title: TD () Delete Title: TRES (X) Change () Addition

 Name:
 FARLEY, PALL
 Name:
 MEUKEL, BILL

 Address:
 1502 HAVEN BEND
 Address:
 6314 WERNER AVE

City-St-Zip: TAMPA, FL 33613 City-St-Zip: NEW PORT RICHEY, FL 34652

 $\label{eq:title:$

 Name:
 Name:
 ALLISTON, CURT

 Address:
 Address:
 9142 CYPRESS KEEP LN

 City-St-Zip:
 City-St-Zip:
 ODESSA, FL 33556

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: TIMOTHY A. WILEY SEC 01/06/2005