

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004240

FILED
Apr 27, 2005
Secretary of State

Entity Name: SHERIFF'S RESERVE UNIT, INC.

Current Principal Place of Business:

1600 SOUTH U.S. HIGHWAY 1
FORT PIERCE, FL 34954

New Principal Place of Business:

Current Mailing Address:

3333 20TH STREET
VERO BEACH, FL 32960

New Mailing Address:

FEI Number: 20-0707283

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, E. ROLLINS II, ESQ.
3333 20TH STREET
VERO BEACH, FL 32960 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: PD () Delete
Name: SMITH, VERNON D
Address: 1600 SOUTH U.S. HWY. 1
City-St-Zip: FT. PIERCE, FL 34954

Title: VPD () Delete
Name: BROWN, E. ROLLINS II
Address: 3333 20TH ST.
City-St-Zip: VERO BEACH, FL 32960

Title: D () Delete
Name: LOUNDS, ED
Address: RT 8 BOX 763-L
City-St-Zip: FT. PIERCE, FL 33451

Title: T () Delete
Name: SKOG, RICHARD
Address: 4700 W MIDWAY RD.
City-St-Zip: FORT PIERCE, FL 349814825

Title: S () Delete
Name: CONRAD, DELONNA
Address: 4700 W MIDWAY RD.
City-St-Zip: FORT PIERCE, FL 349814825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: E. ROLLINS BROWN, II, ESQ.

RA

04/27/2005

Electronic Signature of Signing Officer or Director

Date