

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Jan 06, 2005  
Secretary of State

DOCUMENT# N02000004474

Entity Name: WOODTURNERS OF POLK COUNTY, INC.

**Current Principal Place of Business:**

1711 CEDAR RIDGE RD  
BARTOW, FL 33830

**New Principal Place of Business:**

**Current Mailing Address:**

1711 CEDAR RIDGE RD  
BARTOW, FL 33830

**New Mailing Address:**

FEI Number: 02-0560938

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SESSIONS, CLIF  
1711 CEDAR RIDGE RD  
BARTOW, FL 33830 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: ROBERTS, ED  
Address: 210 MARIANNA DRIVE  
City-St-Zip: AUBURNDALE, FL 33823

Title: SD ( ) Delete  
Name: RUSSELL, JOHN  
Address: 216 BATTLEGROVE DRIVE  
City-St-Zip: DAVENPORT, FL 33837

Title: VD ( ) Delete  
Name: NEWELL, BOB  
Address: 2411 COLONEL FORD DR  
City-St-Zip: LAKELAND, FL 33813

Title: TD ( ) Delete  
Name: SESSIONS, CLIF  
Address: 1711 CEDAR RIDGE ROAD  
City-St-Zip: BARTOW, FL 33830

Title: D ( ) Delete  
Name: SESSIONS, CLIF  
Address: 1711 CEDAR RIDGE RD  
City-St-Zip: BARTOW, FL 33830

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: SWINSON, DAVID  
Address: 105 NORTHWEST 10TH DRIVE  
City-St-Zip: MULBERRY, FL 33860

Title: SD (X) Change ( ) Addition  
Name: SWINSON, MARY  
Address: 105 NORTHWEST 10TH DRIVE  
City-St-Zip: MULBERRY, FL 33860

Title: VD (X) Change ( ) Addition  
Name: KRIPLEAN, JOHN  
Address: 6730 CARRIGE LANE  
City-St-Zip: LAKELAND, FL 33811

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

Title: D (X) Change ( ) Addition  
Name: VARNER, ROBERT  
Address: 510 SADDLE BAG LANE  
City-St-Zip: LAKELAND, FL, FL 33801

Title: D ( ) Change (X) Addition  
Name: RUSSEL, JOHN  
Address: 216 BATTLEGROVE DRIVE  
City-St-Zip: DAVENPORT, FL 33837

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: CLIF SESSIONS

TD

01/06/2005

Electronic Signature of Signing Officer or Director

Date