2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2005
Secretary of State

DOCUMENT# N02000005204

Entity Name: KREWE OF THE SOUTH SHORE MARAUDERS, INC.

Current Principal Place of Business:

9304 RIVER COVE DR
RIVERVIEW, FL 33569

New Principal Place of Business:

Current Mailing Address:

6411 MARBELLA BLVD
APOLLO BEACH, FL 33572

New Mailing Address:

FEI Number: 76-0704335 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CONNETT, STEPHEN G
213 N. PARSONS AV.
BRANDON, FL 33510 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: HANN, RANDY
Address: 9304 RIVER COVE DR
City-St-Zip: RIVERVIEW, FL 33569 US

Title: VD ( ) Delete
Name: ALBRITTON, ELIZABETH
Address: 6324 JAMAICA CR E.
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: VD ( ) Delete
Name: LOVE, RICH
Address: 1023 SAGO PALM WAY
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: SD ( ) Delete
Name: LATHBURY, LEE
Address: 6431 MARBELLA DR
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: TD ( ) Delete
Name: COSGROVE, PAT
Address: 6411 MARSELLA BLVD.
City-St-Zip: APOLLO BEACH, FL 33572 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change ( ) Addition
Name: NOTO, DEBRA
Address: 3401 HEITER ST
City-St-Zip: TAMPA, FL 33607 US

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

Title: SD (X) Change ( ) Addition
Name: HUDDLESTON, SYLVIA
Address: 3528 OSPREY COVE DR
City-St-Zip: RIVERVIEW, FL 33569 US

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: PATRICK M COSGROVE TD 02/21/2005

Electronic Signature of Signing Officer or Director — Date