

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005362

FILED
Feb 25, 2004
Secretary of State**Entity Name:** SUNSHINE CHEERLEADERS ASSOCIATION, INC.**Current Principal Place of Business:**3408 W MAIN STREET
TAMPA, FL 33607**New Principal Place of Business:****Current Mailing Address:**3408 W MAIN STREET
TAMPA, FL 33607**New Mailing Address:**2011 DARLINGTON DRIVE
TAMPA, FL 33619**FEI Number:** 01-0724262**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**JIMENEZ, GARY
3408 W MAIN STREET
TAMPA, FL 33607 US**Name and Address of New Registered Agent:**JIMENEZ, GARY G
3408 W MAIN STREET
TAMPA, FL 33607 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: GARY G JIMENEZ

02/25/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BROWN, DOUGLAS A
Address: 3408 W MAIN STREET
City-St-Zip: TAMPA, FL 33607

Title: T () Delete
Name: JIMENEZ, GARY
Address: 317 W COMMANCHEST
City-St-Zip: TAMPA, FL 33607

Title: V () Delete
Name: GRIMES, BRUCE G
Address: 310 SKY AVE
City-St-Zip: SAFETY HARBOR, FL 33614

Title: S () Delete
Name: VEGA, RUBEN
Address: 2011 DARLINGTON DR
City-St-Zip: TAMPA, FL 33619

Title: C () Delete
Name: FRISK, ARLENE
Address: 3408 W MAIN STREET
City-St-Zip: TAMPA, FL 33607

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

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: C (X) Change () Addition
Name: BENTON, VICKY
Address: 3408 W MAIN STREET
City-St-Zip: TAMPA, FL 33607

Title: C () Change (X) Addition
Name: RAQUET, CINDY
Address: 3408 WEST MAIN STREET
City-St-Zip: TAMPA, FL 33607

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: DOUGLAS A BROWN

P

02/25/2004

Electronic Signature of Signing Officer or Director

Date