

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006344

Entity Name: OSCEOLA PRO BASS CLUB INC.

FILED
Jan 12, 2004
Secretary of State

Current Principal Place of Business:

1446 WOODLAKE CIR
ST. CLOUD, FL 34772

New Principal Place of Business:

Current Mailing Address:

1446 WOODLAKE CIR
ST. CLOUD, FL 34772

New Mailing Address:

FEI Number: 56-2289159

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLMOUTH, LLOYD A
1446 WOODLAKE CIR
ST. CLOUD, FL 34772

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: WILLMOUTH, LLOYD
Address: 1446 WOODLAKE CIR
City-St-Zip: SAINT CLOUD, FL 34772

Title: VD () Delete
Name: DEES, WAYNE
Address: 821 MISSISSIPPI
City-St-Zip: SAINT CLOUD, FL 34769

Title: ST () Delete
Name: ANDERSON, DIANA
Address: 1123 LAKE SHORE
City-St-Zip: KISSIMMEE, FL 34774

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:

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: LLOYD WILLMOUTH

PRES

01/12/2004

Electronic Signature of Signing Officer or Director

Date