2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006455

Entity Name: BOY SCOUT TROOP 544, INC.

FILED Apr 28, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
	RENCH AVENU CITY, FL 32763	E					
Current Mailing Address:				New Mailing Address:			
1825 W. FRENCH AVENUE ORANGE CITY, FL 32763				1825 W FRENCH AVE ORANGE CITY, FL 32763			
FEI Number:	41-2055557	FEI Number Applied For ()	FEI Num	nber Not Appli	cable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
MCCRAY, ROBERT 1825 W. FRENCH AVE ORANGE CITY, FL 32763 US				MCCRAY, ROBERT B 1825 W. FRENCH AVE ORANGE CITY, FL 32763 US			
The above in the State		bmits this statement for the pu	urpose of	f changing it	s registered of	ffice or registered agent, or both,	
SIGNATURE: ROBERT B MCCRAY				04/28/2005			
	Electronic	Signature of Registered Ager	nt			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () D MCCRAY, PAUL 1815 W FRENCH ORANGE CITY, F			Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	VD () C MCCRAY, ROBEI 1825 W. FRENCH ORANGE CITY, F	1 AVENUE		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	STD () C MCCRAY, CATHE 1825 W. FRENCH ORANGE CITY, F	1 AVENUE		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	PD () D VOUGH, JIM 1021 HANCOCK A DELTONA, FL 32			Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () C HARTSHORN, BY 125 SANFORD A' DEBARY, FL 327	V ENUE		Title: Name: Address: City-St-Zip:	D (X) COCKAYNE, MI 1480 RACINE R ORANGE CITY,	RD	
Title: Name: Address: City-St-Zip:	D () D MILLHOLEN, GER 811 W EUCLID A DELAND, FL 327	VE		Title: Name: Address: City-St-Zip:	()	Change () Addition	

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: ROBERT B MCCRAY VD 04/28/2005