## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000001369

Entity Name: HERNANDO JAYCEES INC.

FILED Apr 29, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2294 CANFIELD DR SPRING HILL, FL 34609 **Current Mailing Address: New Mailing Address:** 2294 CANFIELD DR PO BOX 3402 SPRING HILL, FL 34609 SPRING HILL, FL 34611 FEI Number: 59-3149477 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LINK, SCOTT 2294 CANFIELD DR SPRING HILL, FL 34609 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete ( ) Change (X) Addition BAIRD, DENBY Name: Name: Address: Address: 1451 KENLAKE AVENUE City-St-Zip: City-St-Zip: SPRING HILL, FL 34606 Title: Title: ( ) Change (X) Addition ( ) Delete Name: Name: PRESSLER, DAN Address: Address: 9377 CHASE STREET City-St-Zip: City-St-Zip: SPRING HILL, FL 34606 Title: () Delete Title: ( ) Change (X) Addition BRONISZ, MICHELLE Name: Name: 9221 JENNA ROAD Address: Address: City-St-Zip: City-St-Zip: SPRING HILL, FL 34608 Title: () Delete Title: ( ) Change (X) Addition Name: Name: BRONISZ, JONATHAN 9221 JENNA ROAD Address: Address: City-St-Zip: City-St-Zip: SPRING HILL, FL 34608 Title: () Delete Title: ( ) Change (X) Addition DEROIDE, JENNY Name: Name: 1161 CARMONA AVE Address: Address: City-St-Zip: City-St-Zip: SPRING HILL, FL 34608 Title: () Delete Title: ( ) Change (X) Addition HECKMAN, DANA Name: Name: Address: Address: 7352 HOLIDAY DRIVE SPRING HILL, FL 34606 City-St-Zip: 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: TRACEY L. BAIRD T 04/29/2004

TRACEY L. BAIRD, TREASURER 1451 KENLAKE AVENUE SPRING HILL, FL 34606