

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003264

FILED  
Apr 28, 2004  
Secretary of State

Entity Name: CHOCTAW TOUCHDOWN CLUB, INC.

**Current Principal Place of Business:**

110 RACETRACK NW.  
FT. WALTON BEACH, FL 32547

**New Principal Place of Business:**

**Current Mailing Address:**

110 RACETRACK NW.  
FT. WALTON BEACH, FL 32547

**New Mailing Address:**

FEI Number: 65-1215456

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KETCHEL, TERRANCE R  
126 NE EGLIN PARKWAY  
FORT WALTON BEACH, FL 32548 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: D ( ) Delete  
Name: ANDERSON, BEN  
Address: 569 O'OMBRE CIRCLE  
City-St-Zip: FT. WALTON BEACH, FL 32547

Title: D ( ) Delete  
Name: NEALE, WILLIAM  
Address: 21 PARADISE POINT ROAD  
City-St-Zip: SHALIMAR, FL 32579

Title: D ( ) Delete  
Name: DENSMORE, TED  
Address: 797 BLVD. OF CHAMPIONS  
City-St-Zip: SHALIMAR, FL 32579

Title: D ( ) Delete  
Name: PACHECO, KATHY  
Address: 60 5TH AVENUE  
City-St-Zip: SHALIMAR, FL 32579

Title: D ( ) Delete  
Name: JAMIESON, NANCY  
Address: 409 NORTH HAMPTON CIRCLE  
City-St-Zip: FT. WALTON BEACH, FL 32548

Title: D ( ) Delete  
Name: KETCHEL, TERRY  
Address: 13 LAKE LORRAINE CIRCLE  
City-St-Zip: SHALIMAR, FL 32579

**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: ( ) 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: TED DENSMORE

D

04/28/2004

Electronic Signature of Signing Officer or Director

Date