

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90342 001 ****61.25

DOCUMENT # N03000004486

1. Entity Name
MILLENNIUM SERTOMA CLUB, INC.



Principal Place of Business
**14714 LORETTO CIR
ODESSA, FL 33556**

Mailing Address
**14714 LORETTO CIR
ODESSA, FL 33556**



2. Principal Place of Business
1414 LORETTO CIRCLE

3. Mailing Address
1414 LORETTO CIRCLE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04262004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number

20-0098765

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**KENNEDY, JOSEPH
14714 LORETTO CIR 1414 LORETTO CIRCLE
ODESSA, FL 33556**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	KENNEDY, JOSEPH	
STREET ADDRESS	14714 LORETTO CIR 1414 LORETTO CIRCLE	
CITY-ST-ZIP	ODESSA, FL 33556	
TITLE	D	<input type="checkbox"/> Delete
NAME	KENNEDY, JILL	
STREET ADDRESS	14714 LORETTO CIR 1414 LORETTO CIRCLE	
CITY-ST-ZIP	ODESSA, FL 33556	
TITLE	D	<input type="checkbox"/> Delete
NAME	MYER, JERRY	
STREET ADDRESS	14714 LORETTO CIR 1414 LORETTO CIRCLE	
CITY-ST-ZIP	ODESSA, FL 33556	
TITLE	D	<input type="checkbox"/> Delete
NAME	MYER, SUSAN	
STREET ADDRESS	14714 LORETTO CIR 1414 LORETTO CIRCLE	
CITY-ST-ZIP	ODESSA, FL 33556	
TITLE	D	<input type="checkbox"/> Delete
NAME	DIXON, TED	
STREET ADDRESS	14714 LORETTO CIR 1414 LORETTO CIRCLE	
CITY-ST-ZIP	ODESSA, FL 33556	
TITLE	D	<input type="checkbox"/> Delete
NAME	SCHIAVO, JUDY	
STREET ADDRESS	14714 LORETTO CIR 1414 LORETTO CIRCLE	
CITY-ST-ZIP	ODESSA, FL 33556	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Susan N. Myer* **SUSAN N. MYER**

4/26/04

813-908-8411

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #