

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2005
Secretary of State

DOCUMENT# N03000004701

Entity Name: PORT CHARLOTTE CARNIVAL ASSOCIATION, INC.

Current Principal Place of Business:

2201 PRIVATE CIRCLE
PORT CHARLOTTE, FL 33953

New Principal Place of Business:

MILLER, AMOS S.
PORT CHARLOTTE, FL 33952

Current Mailing Address:

2201 PRIVATE CIRCLE
PORT CHARLOTTE, FL 33953

New Mailing Address:

830 CONREID DRIVE
PORT CHARLOTTE, FL 33952

FEI Number: 33-1055400

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DESIGNES, HOLLIS A
2201 PRIVATE CIRCLE
PORT CHARLOTTE, FL 33953 US

Name and Address of New Registered Agent:

MILLER, AMOS A
830 CONREID DRIVE
PORT CHARLOTTE, FL 33952 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: AMOS S. MILLER

03/23/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: DES VIGNES, HOLIS A
Address: 2201 PRIVATE CIRCLE
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: DV () Delete
Name: HUGGINS, NORMAN
Address: 3609 OLD WINTER GARDEN RD
City-St-Zip: ORLANDO, FL 32805

Title: D () Delete
Name: DE SILVA, HILLARIE
Address: 21881 BEVERLY AVE
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D () Delete
Name: MILLER, AMOS S
Address: 830 CONREID DR
City-St-Zip: PORT CHARLOTTEE, FL 33952

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: MILLER, AMOS S
Address: 830 CONREID DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: DV (X) Change () Addition
Name: BIDASEE, SONNY
Address: 355 LINDON STREET
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: D (X) Change () Addition
Name: DESILVA, HILLARY
Address: 21881 BEVERLY AVENUE
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D (X) Change () Addition
Name: HUGGINS, NORMAN
Address: 3609 OLD WINTER GARDEN ROAD
City-St-Zip: ORLANDO, FL 32805

Title: D () Change (X) Addition
Name: BAKSH, SAM
Address: 23454 MOON STREET
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: D () Change (X) Addition
Name: KERR, JEAN A
Address: 17449 CLOVER AVENUE
City-St-Zip: PORT CHARLOTTE, FL 33948

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: JEAN A. KERR

D

03/23/2005

Electronic Signature of Signing Officer or Director

Date