

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005036

FILED  
Mar 30, 2005  
Secretary of State

Entity Name: SMYRNA REDFISH CLASSIC INC.

**Current Principal Place of Business:**

4 N CAUSEWAY  
NEW SMYRNA BCH, FL 32169

**New Principal Place of Business:**

**Current Mailing Address:**

4 N CAUSEWAY  
NEW SMYRNA BCH, FL 32169

**New Mailing Address:**

FEI Number: 54-2114100

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PERNELL, MARK  
4 N CAUSEWAY  
NEW SMYRNA BCH, FL 32169 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: PD ( ) Delete  
Name: PERNELL, MARK  
Address: 4 N CAUSEWAY  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VPD ( ) Delete  
Name: PERNELL, DEBORAH  
Address: 4 N CAUSEWAY  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D ( ) Delete  
Name: SHEA, TARA  
Address: 1460 S GLENCOE RD  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

**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:

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: MARK PERNELL

PD

03/30/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date