## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000006498

FILED Apr 20, 2005 Secretary of State

Entity Name: COUNTRYSIDE BOYS BASKETBALL CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

2155 CIELO CIRCLE EAST COUNTRYSIDE HIGH SCHOOL CLEARWATER, FL 33579 3000 STATE ROAD 580 CLEARWATER, FL 33761

Current Mailing Address: New Mailing Address:

2155 CIELO CIRCLE EAST COUNTRYSIDE HIGH SCHOOL CLEARWATER, FL 33579 3000 STATE ROAD 580 CLEARWATER, FL 33761

FEI Number: 54-2125954 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:

F & L CORP ONE INDEPENDENT DRIVE SUITE 1300 JACKSONVILLE, FL 32202 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:

Title: PRES (X) Delete Title: ( ) Change ( ) Addition

 Name:
 CASH, JEFFERY L
 Name:

 Address:
 3044 DOMINION CT.
 Address:

 City-St-Zip:
 SAFETY HARBOR, FL 34695
 City-St-Zip:

Title: VP ( ) Delete Title: PRES (X) Change ( ) Addition

 Name:
 MELTON, MIKE
 Name:
 MELTON, MIKE

 Address:
 3043 KEVLYN CT.
 Address:
 3043 KEVLYN CT.

City-St-Zip: SAFETY HARBOR, FL 34695 City-St-Zip: SAFETY HARBOR, FL 34695

Title: TREA () Delete Title: () Change () Addition

Name:MILLIGAN, TERIName:Address:2155 CIELO CIRCLE EASTAddress:City-St-Zip:CLEARWATER, FL 33579City-St-Zip:

Title: SEC ( ) Delete Title: SEC (X) Change ( ) Addition

Name:ANDERSON, GWENName:MURRAY, RACHAELAddress:722 OLD VILLAGE WAYAddress:2951 BAY MEADOW CT.City-St-Zip:OLDSMAR, FL 34677City-St-Zip:CLEARWATER, FL 33761

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: MIKE MELTON PRES 04/20/2005