

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007715

FILED
Apr 30, 2005
Secretary of State

Entity Name: NORTH FLORIDA CHEER CENTER ALLSTARS, INC.

Current Principal Place of Business:

1027 BLANDING BLVD #602
ORANGE PARK, FL 32065

New Principal Place of Business:

Current Mailing Address:

1027 BLANDING BLVD #602
ORANGE PARK, FL 32065

New Mailing Address:

3172 PEPPERTREE DR.
MIDDLEBURG, FL 32068

FEI Number: 20-0051003

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SMITH, DAVID
2974 SPARKLEBERRY DR
MIDDLEBURG, FL 32068 US

Name and Address of New Registered Agent:

SMITH, DAVID
3172 PEPPERTREE DR.
MIDDLEBURG, FL 32068 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:

04/30/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMITH, DAVID
Address: 2974 SPARKLEBERRY DR
City-St-Zip: MIDDLEBURG, FL 32068

Title: S () Delete
Name: WILKA, TINA
Address: 1857 ALBERTA CT N
City-St-Zip: MIABBLEBURG, FL 32068

Title: T (X) Delete
Name: SMITH, DONNA
Address: 2974 SPARKLEBERRY DR
City-St-Zip: MIDDLEBURG, FL 32068

Title: T (X) Delete
Name: RAMOS, BEVERLY
Address: 2704 RIVER OAK DR
City-St-Zip: ORANGE PARK, FL 32073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HIGHHOUSE, ERIN
Address: 1027 BLANDING BLVD. #602
City-St-Zip: ORANGE PARK, FL 32065

Title: S/T (X) Change () Addition
Name: SMITH, DAVID J
Address: 3172 PEPPERTREE DR.
City-St-Zip: MIDDLEBURG, FL 32068

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: DAVID SMITH

S/T

04/30/2005

Electronic Signature of Signing Officer or Director

Date