2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008866

FILED Jan 28, 2005 Secretary of State

Entity Name: CONSERVATIVE ELEPHANT CLUB, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	BROAD STRE ILLE, FL 3460				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	BROAD STRE ILLE, FL 3460				
FEI Number:	20-0294720	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:	
20 SOUTH BROOKSV	AN LAW FIRM, I BROAD STRE ILLE, FL 3460	EET 11 US	ourpose of changing its registere	ed office or registered agent, or both,	
	of Florida.			a omes of regions and agent, of zeati,	
SIGNATUF		is Signature of Degistered Ag	ont	Data	
		ic Signature of Registered Ag		Date	
OFFICERS	S AND DIREC	TORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	DS () HOGAN, MARY P.O. BOX 1020 BROOKSVILLE,	5	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DT () SAMPLES, GAIL 437 BELL AVEN BROOKSVILLE,	IUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () SCHRAUT, GAR P.O. BOX 1104 BROOKSVILLE,		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () WILFONG, DEN P.O. BOX 485 BROOKSVILLE,		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () BICKEL, TERRY P.O. BOX 414 BROOKSVILLE,		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	P () HOGAN, THOM	Delete	Title: Name:	() Change () Addition	

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: THOMAS S. HOGAN, JR. P 01/28/2005