

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000397

Entity Name: HONORCLUB INC.

FILED
May 03, 2005
Secretary of State

Current Principal Place of Business:

22 SHERWOOD DRIVE
SHALIMAR, FL 32579

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 855
SHALIMAR, FL 32579

New Mailing Address:

FEI Number: 52-2440808 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BREAZEALE, B. T II
22 SHERWOOD DRIVE
SHALIMAR, FL 32579 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: P () Delete
Name: NOLAND, SEAN R
Address: 40840 N. GRAND AVE.
City-St-Zip: ANTIOCH, IL 60002

Title: D () Delete
Name: HALEY, EDWARD P
Address: 900 NORTH SHORE DRIVE
City-St-Zip: LAKE BLUFF, IL 60044

Title: D () Delete
Name: HALEY, ANDREW M
Address: 900 NORTH SHORE DRIVE
City-St-Zip: LAKE BLUFF, IL 60044

Title: D () Delete
Name: BREAZEALE, B. T II
Address: 22 SHERWOOD DRIVE
City-St-Zip: SHALIMAR, FL 32579

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:

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: B.T. BREAZEALE II

D

05/03/2005

Electronic Signature of Signing Officer or Director

Date