

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000423

FILED
Apr 29, 2005
Secretary of State

Entity Name: FLORIDA RURAL CITIES AND COMMUNITES, INC.

Current Principal Place of Business:

650 DOUGLAS AVE
SUITE 1035
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

Current Mailing Address:

650 DOUGLAS AVE
SUITE 1035
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

POST OFFICE BOX 660
OAK HILL, FL 32759

FEI Number: 20-0776916

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAHAM, JESSE E JR
369 N NEW YORK AVE
WINTER PARK, FL 32789 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: D () Delete
Name: BARNETT, RICHARD
Address: P.O. BOX 660
City-St-Zip: OAK HILL, FL 32759

Title: D () Delete
Name: MERCER, RONALD H
Address: 215 INDIAN CREEK RD
City-St-Zip: OAK HILL, FL 32759

Title: D () Delete
Name: CARPENTER, CHARLES D
Address: 2301 CHERRYWOOD LANE
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: CARPENTER, CHARLES D
Address: 2301 CHERRYWOOD LANE
City-St-Zip: ORLANDO, FL 32803

Title: D (X) Change () Addition
Name: ROARK, FRANK H
Address: 762 ANTONETTE AVENUE
City-St-Zip: WINTER PARK, FL 32789

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: CHARLES D CARPENTER

D

04/29/2005

Electronic Signature of Signing Officer or Director

Date