## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Jun 03, 2005 8:00 am Secretary of State

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|---|--|---|---|--|----------------|--|--|--|
| 2796 WILDE LAKE BLVD. 279   |  | Mailing Address<br>2796 WILDE LAKE BLVI<br>PENSACOLA, FL 32526                                | 796 WILDE LAKE BLVD.  |  |                |  |  |  |
| 2. Principal Place of Business 3.   |  | 3. Mailing Address  | J. Mailing Address  |  |                |  |  |  |
| Suite, Apt. #, etc.   |  | Suite, Apt. #, etc.   |   | 02022005 EU  | om e           | 0.000000000000000000000000000000000000   |  |  |
| City & State  |  | City & State  |   | 4. FEI Number                                      | 5473           | <del></del>  | pplied For<br>ot Applicable                          |  |
| Zip   | Country  | Zip   | Country   | 5. Certificate of Sta                              | atus Desired   | <b>58.75</b> musicus   | THE T  |  |
|   | 6. Name and Address of Current   | Registered Agent  |   | 7. Name and Add                                    | reas of New Re | gistered Agent   |  |  |
| SUNDAY-   | GRACE, JIMONICA  |   | Name _  | ني سيندن د دي ديد سيسي د نسب                       |                |  |  |  |
| SUNDAY-GRACE, JIMONICA<br>7801 CALAHAN PLACE<br>PENSACOLA, FL 32534   |  |   | Street Addre  | Street Address (P.O. Box Number is Not Acceptable) |                |  |  |  |
|   |  |   | <u> </u>  |  |                |  |  |  |
|   |  |   | City  |  |                | FL Zip Coo   | de   |  |
| signature   |  |   |   |  |                |  |  |  |
|   | Signature, typed or preried name of registered agent i   | <del></del>   | Registered Agent signature re-  | iquired when renstating)                           |                | DATE   |  |  |
|   | Sgretze, speed or protect name of registered agent in Filling Fee is \$61.25  Due by May 1, 2005   | 9. Election Cam<br>Trust Fund Ci  | paign Financing   | \$5.00 3 E E C.                                    | Florie         | ike check payable to<br>da Department of S   | itato  |  |
| 10.   | Filing Fee is \$81.25<br>Due by May 1, 2005<br>OFFICERS AND DIE  | 9. Election Cam<br>frust Fund Cam<br>RECTORS  | paign Financing ontribution.  | \$5.00 BEET  | Florie         | ike check payable to<br>da Department of S   | itato  |  |
| TITLE   | Filing Fee is \$81.25<br>Due by May 1, 2005<br>OFFICERS AND DIF  | 9. Election Cam<br>Trust Fund Co  | paign Financing ontribution.  | \$5.00 3 E E C.                                    | Florie         | ike check payable to<br>da Department of S   | itato  |  |
| TITLE<br>NAME   | Filing Fee is \$81.25 Due by May 1, 2005  OFFICERS AND DIF D CALVIN, KEITH   | 9. Election Cam<br>frust Fund Cam<br>RECTORS  | paign Financing ontribution.  | \$5.00 3 E E C.                                    | Florie         | ike check payable to<br>da Department of S   | V.10   |  |
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| TITLE<br>NAME<br>STREET ADDRESS   | Filing Fee is \$61.25 Due by May 1, 2005  OFFICERS AND DIF D CALVIN, KEITH 1604 GARY AVENUE  | 9. Election Cam<br>frust Fund Cam<br>RECTORS  | paign Financing ontribution.  | \$5.00 3 E E C.                                    | Florie         | ike check payable to<br>da Department of S   | V.10   |  |
| TITLE NAME STREET ADDRESS CIFY-ST-ZIP TITLE NAME  | Filing Fee is \$61.25 Due by May 1, 2005  OFFICERS AND DIF  D CALVIN, KEITH 1604 GARY AVENUE PENSACOLA, FL 32505 D CALVIN, DEBRA   | 9. Election Cam<br>Trust Fund Co<br>RECTORS   | paign Financing ontribution.  | \$5.00 3 E E C.                                    | Florid         | ike check payable to<br>da Department of S<br>S AND DIRECTORS IN<br>Change   | N.10 Addition  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS   | Filing Fee is \$61.25 Due by May 1, 2005  OFFICERS AND DIF  D CALVIN, KEITH 1604 GARY AVENUE PENSACOLA, FL 32505 D CALVIN, DEBRA 1604 GARY AVENUE  | 9. Election Cam<br>Trust Fund Co<br>RECTORS   | paign Financing ontribution.  | \$5.00 3 E E C.                                    | Florid         | ike check payable to<br>da Department of S<br>S AND DIRECTORS IN<br>Change   | N.10 Addition  |  |
| TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP   | Filing Fee is \$61.25 Due by May 1, 2005  OFFICERS AND DIF  D CALVIN, KEITH 1604 GARY AVENUE PENSACOLA, FL 32505 D CALVIN, DEBRA 1804 GARY AVENUE PENSACOLA, FL 32505  | 9. Election Cam Trust Fund Co   | paign Financing ontribution.  11.  ITTLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TIFLE  NAME  STREET ADDRESS  CITY-ST-ZIP   | \$5.00 3 E E C.                                    | Florid         | ike check payable to the Department of Signature of Signa | N.10 Addition  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE   | Filing Fee is \$61.25 Due by May 1, 2005  OFFICERS AND DIF  D CALVIN, KEITH 1604 GARY AVENUE PENSACOLA, FL 32505 D CALVIN, DEBRA 1604 GARY AVENUE PENSACOLA, FL 32505 D  | 9. Election Cam<br>Trust Fund Co<br>RECTORS   | paign Financing ontribution.   11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE   | \$5.00 3 E E C.                                    | Florid         | ike check payable to<br>da Department of S<br>S AND DIRECTORS IN<br>Change   | N.10 Addition  |  |
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12. Thereby certify that the information supplied with this Illing does not qualify 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 signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

R

obert C. McKibber

5-1-05

(850) 944-017