

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001142

FILED
Apr 27, 2005
Secretary of State

Entity Name: KREWE OF AGUSTINA DE ARAGON FOUNDATION, INC.

Current Principal Place of Business:

206 MASON ST
BRANDON, FL 335115212

New Principal Place of Business:

PO BOX 21602
TAMPA, FL 336021602

Current Mailing Address:

206 MASON ST
BRANDON, FL 335115212

New Mailing Address:

PO BOX 21602
TAMPA, FL 336221602

FEI Number: 20-0576971

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDENFIELD, MICHAEL S
206 MASON ST
BRANDON, FL 335115212 US

Name and Address of New Registered Agent:

ROBERTSON, BRIDGET
3421 W SAN PEDRO ST
TAMPA, FL 336297922 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: BRIDGET ROBERTSON

04/27/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RPBERTSON, BRIDGET
Address: 3421 W SAN PEDRO ST
City-St-Zip: TAMPA, FL 336297922

Title: D () Delete
Name: SCARANTINO, ANGELA
Address: 2977 W KNIGHTS AVE
City-St-Zip: TAMPA, FL 336111663

Title: D () Delete
Name: TALAVERA, MARIEM
Address: 504 S ALBANY AVE UNIT D
City-St-Zip: TAMPA, FL 336062064

Title: D () Delete
Name: RICGARDSON, KATHI
Address: 8615 BOYSENBERRY DR
City-St-Zip: TAMPA, FL 336356206

Title: D () Delete
Name: HAEBERLEIN, DOUG
Address: 4460 DUNMORE AVE APT 11
City-St-Zip: TAMPA, FL 336115701

Title: D () Delete
Name: ALMENGUAL, LYNDIA
Address: 19106 FORREST DR
City-St-Zip: ODESSA, FL 335564209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROBERTSON, BRIDGET
Address: 3421 W SAN PEDRO ST
City-St-Zip: TAMPA, FL 336297922

Title: T (X) Change () Addition
Name: SCARANTINO, ANGELA
Address: 2977 W KNIGHTS AVE
City-St-Zip: TAMPA, FL 336111663

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: BRIDGET ROBERTSON

P

04/27/2005

Electronic Signature of Signing Officer or Director

Date