

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2005 8:00 am
Secretary of State

02-28-2005 90187 042 ****61.25

DOCUMENT # N04000001249 1. Entity Name CENTRAL FLORIDA CHAPTER, SPEBSQSA, INC.					
Principal Place of Business % KENNETH E CARTER 1202 ARRIAGO WAY THE VILLAGES, FL 32162				Mailing Address P O BOX 949 LADY LAKE, FL 32158	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		01282005 Chg-NP CR2E037 (10/03)	
City & State		City & State		4. FEI Number 39-6089130	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CARTER, KENNETH E. 1202 ARRIAGO WAY THE VILLAGES, FL 32162				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD PAGE, WAYNE J 1706 PALO ALTO AVE THE VILLAGES, FL 32158	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD CARTER, KENNETH E 1202 ARRIAGO WAY THE VILLAGES, FL 32162	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD REYNOLDS, DAVID W 702 CORTEZ WAY THE VILLAGES, FL 32159	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD BORDERS, CHARLES 1500 LAVERA ST LEESBURG, FL 34748	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD CARTER, KENNETH E 1202 ARRIAGO WAY THE VILLAGES, FL 32162	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD FISCHER, RICHARD W 1226 E. SCHWARTZ BLVD LADY LAKE, FL 32159	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD SOBANIA, LEROY E 8469 SE 177TH PENMAN PLACE THE VILLAGES, FL 32162	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD OPPENHEIMER, ERHARD 1219 TARPON LANE LADY LAKE, FL 32159	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BERNARD, WILLIAM J 17800 SE 100TH TERRACE SUMMERFIELD, FL 34991	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HIMMELMAN, DONALD R 17985 SE 102ND CT SUMMERFIELD, FL 344917421	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Richard W. Fischer</i> RICHARD W. FISCHER			2/18/05		352-753-3002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		Daytime Phone #