

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 04, 2005
Secretary of State**

DOCUMENT# N04000002795

Entity Name: SARASOTA SEABREEZE FLYERS, INC.

Current Principal Place of Business:

6629 DEERING CIRCLE
SARASOTA, FL 34240

New Principal Place of Business:

Current Mailing Address:

6629 DEERING CIRCLE
SARASOTA, FL 34240

New Mailing Address:

FEI Number: 65-1220848 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROTRUCK, ROBERT R
6629 DEERING CIRCLE
SARASOTA, FL 34240 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: PD () Delete
Name: DELLA VOLPE, VICTOR
Address: 5866 SHADY BROOK WAY
City-St-Zip: SARASOTA, FL 342434861

Title: VD () Delete
Name: SENATORE, LOUIS
Address: 535 BLUE JAY PLACE
City-St-Zip: SARASOTA, FL 34236

Title: STD () Delete
Name: ROTRUCK, ROBERT R
Address: 6629 DEERING CIRCLE
City-St-Zip: SARASOTA, FL 34240

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: ROTRUCK, ROBERT R
Address: 6629 DEERING CIRCLE
City-St-Zip: SARASOTA, FL 34240

Title: SD () Change (X) Addition
Name: STOVALL, THOMAS M
Address: 870 FAULKWOOD COURT
City-St-Zip: SARASOTA, FL 34232

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: ROBERT R. ROTRUCK

SD

01/04/2005

Electronic Signature of Signing Officer or Director

Date