

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004576

FILED
Apr 26, 2005
Secretary of State

Entity Name: STRIVE FOR EXCELLENCE, INC.

Current Principal Place of Business:

5145 E. BUSINESS 98
PARKER, FL 32401

New Principal Place of Business:

16200 PANAMA CITY BEACH PARKWAY
PANAMA CITY BEACH, FL 32413

Current Mailing Address:

P.O. BOX 9949
PANAMA CITY BEACH, FL 32417

New Mailing Address:

FEI Number: 20-1104393 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEAK, ROLAN
165 MANISTEE DR.
PANAMA CITY BEACH, FL 32413 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: JONES, LISA
Address: 226 COLLEGE AVE.
City-St-Zip: PANAMA CITY, FL 32401

Title: D () Delete
Name: WELLS, J. GARY
Address: 2704 ARDEN AVE.
City-St-Zip: PANAMA CITY, FL 32405

Title: D () Delete
Name: SMITH, DANA
Address: 429 BUNKERS COVE RD.
City-St-Zip: PANAMA CITY, FL 32401

Title: D () Delete
Name: PEAK, ROLAN
Address: 165 MANISTEE DR.
City-St-Zip: PANAMA CITY BEACH, FL 32413

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ROLAN PEAK

D

04/26/2005

Electronic Signature of Signing Officer or Director

Date