

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 07, 2005 8:00 am
Secretary of State

05-03-2005 90095 002 ****61.25

DOCUMENT # N04000005422 1. Entity Name FLORIDA RATTLERS INC.					
Principal Place of Business 2242 LINDA ST. LAKE WALES, FL 33853 US			Mailing Address 2242 LINDA ST. LAKE WALES, FL 33853 US		
2. Principal Place of Business		3. Mailing Address			
Suits, Apt. #, etc.		Suits, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	01172005 753147126 CR2E037 (10/03) 753147126	
6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent THOMAS, RANDY 2242 LINDA ST. LAKE WALES, FL 33853			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 <u>Randy Thomas</u> DATE <u>4/26/05</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE</small>					
Filing Fee is \$81.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	DIR	THOMAS, RANDY <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2242 LINDA ST.		STREET ADDRESS	NAME	CITY-ST-ZIP
CITY-ST-ZIP	LAKE WALES, FL 33853-33898		CITY-ST-ZIP	NAME	CITY-ST-ZIP
TITLE	DIR	GLENN, JENA M <input checked="" type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1318 HEARTLAND CIRCLE		STREET ADDRESS	NAME	CITY-ST-ZIP
CITY-ST-ZIP	MULBERRY, FL 33860		CITY-ST-ZIP	NAME	CITY-ST-ZIP
TITLE	DIR	LAMBETH, DEBBIE <input checked="" type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8 LYNN LN.		STREET ADDRESS	NAME	CITY-ST-ZIP
CITY-ST-ZIP	FROSTPROOF, FL 33843		CITY-ST-ZIP	NAME	CITY-ST-ZIP
TITLE	DIR	Calvi, Doreen <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2471 Carriage Dr		STREET ADDRESS	NAME	CITY-ST-ZIP
CITY-ST-ZIP	Lake Wales, FL 33898		CITY-ST-ZIP	NAME	CITY-ST-ZIP
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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.					

Randy Thomas

006421



ATTACHMENT

Consumer's Certificate of Exemption

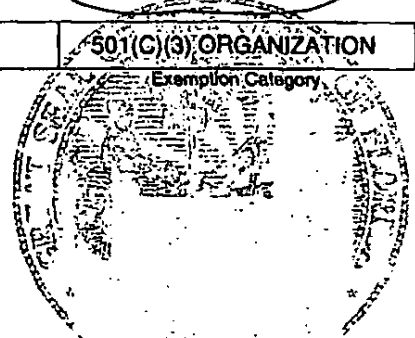
Issued Pursuant to Chapter 212, Florida Statutes

06-624313 7R-14
01/02
N 40005400

85-8013113242C-4	06/16/2004	06/30/2009	501(C)(3) ORGANIZATION
Certificate Number	Effective Date	Expiration Date	Exemption Category

This certifies that

FLORIDA RATTLERS INC
2242 LINDA ST
LAKE WALES FL 33898-7462



is exempt from the payment of Florida sales and use tax on real property rented, transient rental property rented, tangible personal property purchased or rented, or services purchased.



Important Information for Exempt Organizations

DR-14
R. 01/02

1. You must provide all vendors and suppliers with an exemption certificate before making tax-exempt purchases. See Rule 12A-1.039, Florida Administrative Code (FAC).
2. Your *Consumer's Certificate of Exemption* is to be used solely by your organization for your organization's customary nonprofit activities.
3. Purchases made by an individual on behalf of the organization are taxable, even if the individual will be reimbursed by the organization.
4. This exemption applies only to purchases your organization makes. The sale or lease to others by your organization of tangible personal property, sleeping accommodations or other real property is taxable. Your organization must register, and collect and remit sales and use tax on such taxable transactions. Note: Churches are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.070, FAC).
5. It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Under no circumstances should this certificate be used for the personal benefit of any individual. Violators will be liable for payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a third degree felony. Any violation will necessitate the revocation of this certificate.
6. If you have questions regarding your exemption certificate, please contact the Exemption Unit of Central Registration at 850-487-4130. The mailing address is 5050 West Tennessee Street, Tallahassee, FL 32399-0100.