2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N04000006375

1. Entity Name
PASCO PRIDE COALITION, INC.

FILED
05 SEP 20 PM 2:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
4133 THYS ROAD NEW PORT RICHEY, FL 34653	4133 THYS ROAD NEW PORT RICHEY, FL 34653

09132005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
18232 Monte Verde Drive	P.O. Box 1845
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Spring Hill, FL	City & State: Elfers, FL
Zip: 34610-1668 Country: Pasco	Zip: 34680-1845 Country: Pasco

4. FEI Number: 51-0517533 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DIGREGORIO, MARC 18232 MONTE VERDE DRIVE SPRING HILL, FL 34610-1668	Name: SAME 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: Marc N. DiGregorio DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by September 7, 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	D BREWER, BOB 4117 RIDGEFIELD AVENUE HOLIDAY, FL 346911648	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PATRICIA D. BURKE - D 1217 HAWTHORN ST. Zephyrhills, FL 33540	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DIGREGORIO, MARC 18232 MONTE VERDE DRIVE SPRING HILL, FL 346101668	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	FRANCES E. CASCIO - D 1217 HAWTHORN ST. Zephyrhills, FL 33540	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHAMBROOK, DOREEN PO BOX 854 ELFERS, FL 348600854	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Anne Cruess Barnes - D 7536 Coventry Drive Port Richey, FL 34668	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	400059796264 09/20/05--01072--010 **70.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	9/20	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ 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: Marc N. DiGregorio Marc N. DiGregorio 9/16/05 727-857-0041
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #