

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008023

FILED
May 04, 2006
Secretary of State

Entity Name: SCORE FOUNDATION OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

8954 SPYGLASS LOOP
CLERMONT, FL 34711

New Principal Place of Business:

9437 DANEY ST
GOTHA, FL 34734

Current Mailing Address:

8954 SPYGLASS LOOP
CLERMONT, FL 34711

New Mailing Address:

FEI Number: 55-0878586 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DEMOTT, JON
8954 SPYGLASS LOOP
CLERMONT, FL 34711 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: P () Delete
Name: DEMOTT, JON
Address: 8954 SPYGLASS LOOP
City-St-Zip: CLERMONT, FL 34711

Title: V () Delete
Name: HOLDEN, KEVIN
Address: 1971 KAROLINA AVE
City-St-Zip: ORLANDO, FL 32879

Title: S () Delete
Name: CROWELL, ROBERT
Address: 1215 E HARDING ST
City-St-Zip: ORLANDO, FL 32806

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: DEMOTT, JON
Address: 8954 SPYGLASS LOOP
City-St-Zip: CLERMONT, FL 34711

Title: P (X) Change () Addition
Name: HOLDEN, KEVIN
Address: 9437 DANEY ST
City-St-Zip: GOTHA, FL 34734

Title: S (X) Change () Addition
Name: CROWELL, ROBERT
Address: 9437 DANEY ST
City-St-Zip: GOTHA, FL 34734

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JONATHAN DEMOTT

VP

05/04/2006

Electronic Signature of Signing Officer or Director

Date