2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010144

ANDERSON, BILL

ORLANDO, FL 32808

2014 KINGSLAND AVENUE

Name:

Address:

City-St-Zip:

FILED Apr 09, 2005 Secretary of State

Entity Nar	me: DOCTO	OR BIRDS SOCIAL CLUB, INC			
Current Principal Place of Business:			New Principal Place of Business:		
2812 ARRO ORLANDO	OW LANE), FL 32808				
Current Mailing Address:			New Mailing Address:		
2812 ARRO ORLANDO	OW LANE), FL 32808				
FEI Number:	20-1800139	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
KIRLEW, 0 2812 ARRO ORLANDO		US			
	named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	onic Signature of Registered A	gent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PRES (KIRLEW, CEI 2812 ARROW ORLANDO, F	/ LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HALL, CLIVE) Delete BRIDGE LANE L 32808	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TREA (MCKINLEY, E 4907 LABRAI ORLANDO, F	OOR LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	SEC () Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: BILL A ANDERSON SECR 04/09/2005