2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005
Secretary of State

DOCUMENT# N04000010551

Entity Name: INTERFAITH/INTERAGENCY NETWORK OF CHARLOTTE COUNTY, INC.

Current Principal Place of Business:

1750 MANZANA ZVE
PUNTA GORDA, FL 33950

New Principal Place of Business:

21075 QUESADA AVENUE
PORT CHARLOTTE, FL 33952

Current Mailing Address:

1750 MANZANA ZVE
PUNTA GORDA, FL 33950

New Mailing Address:

PO BOX 495987
PORT CHARLOTTE, FL 339495987

FEI Number: 20-1860430 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

THOMAS, RONALD W
1750 MANZANA ZVE
PUNTA GORDA, FL 33950 US

Name and Address of New Registered Agent:

CELORIE, DENNIS J
PO BOX 496987
PORT CHARLOTTE, FL 33952 US

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: DENNIS J. CELORIE 04/26/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MS ( ) Change (X) Addition
Name: BALA, BRENDA PRES.
Address: 18501 MURDOCK CIRCLE STE 301
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: MR ( ) Change (X) Addition
Name: THOMAS, RONALD W VP
Address: 1750 MANZANA AVE
City-St-Zip: PUNTA GORDA, FL 33950

Title: MR ( ) Change (X) Addition
Name: BROWN, CRAIG SEC
Address: 21075 QUESADA AVE
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: MR ( ) Change (X) Addition
Name: VERSNIK, PAUL TREAS
Address: 1777 TAMIAMI TRAIL STE 501
City-St-Zip: PORTR CHARLOTTE, FL 33948

Title: MR ( ) Change (X) Addition
Name: CELORIE, DENNIS J EX DIR
Address: PO BOX 495987
City-St-Zip: PORT CHARLOTTE, FL 339495987

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: DENNIS J. CELORIE E.D. 04/26/2005
Electronic Signature of Signing Officer or Director Date