2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 12, 2005 8:00 am Secretary of State

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DOCUMENT # N0400010816 1. Entity Name FLORIDA FOUNDATION VOLUNTEER SERTOMA CLUB, INC.				0	1-12-2005	90005 017	****61	1.25	
Principal Place of Business 4443 ROWAN RD 4443 ROWAN RD NEW PORT RICHEY, FL 34653 Mailing Address 4443 ROWAN RD NEW PORT RICHEY, FL		4653	f itahnin an ayin i	91411 8 4 111 8 8 111 8			1767		
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01032005 CI	hg-NP	CR2E037 (10/03)		
City & Stat		City & State		4. FEI Number				plied For t Applicable	
Zip	Country	Zip	Country	5. Certificate of St	atus Desired		.75 Add		
	6. Name and Address of Current i	Registered Agent		7. Name and Add	ress of New	Registered Age	nt		
HOWARD, BONNIE J			Name						
4443 ROWAN RD NEW PORT RICHEY, FL 34653			Street Addres	Street Address (P.O. Box Number is Not Acceptable)					
			City				Zip Code	:	
8 The above	named entity submits this statement for		City FL Zip Code get office or registered agent, or both, in the State of Florida. I am familiar with, and accept						
	tions of registered agent.	to purpose of Changing its re-	Same Source of region	Siered agoni, or oour, ar		onda. Familian	meu wiui,	allo accept	
SIGNATURE Signature, typod or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE; F	Registered Agent signature requ	uired when reinstating)					
SIGNATURE	Signature, typed or printed name of registered agent a			uired when reinstating)	Lyans Logors	DATE		osna Privi	
SIGNATURE	Signature, typed or printed name of registered agent a Filling Fee Is \$61.25 Due by May 1, 2005	9. Election Camp Trust Fund Col	eaign Financing	\$5.00 May Be Added to Fees	Flo	DATE Make check pa	yable to	ate	
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included on this report or supplied with this litting does not quality 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 eath; that I am an officer or director of the corporation or the receiver or trusteg 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 exemption of the receiver of the corporation of the receiver or trusteg 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 exemption of the receiver of the corporation of the receiver or trusteg empowered.

SIGNATURE:

SIGNATURE AND TYPED OB-PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

SIGNATURE AND TYPED OB-PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/5/05 727-849

Daytime Phone #

Florida Foundation Volunteer Sertoma Club

January 6, 2005

Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

To Whom It May Concern:

On January 5, 2005, I inadvertently mailed the Florida Foundation Volunteer Sertoma Club 2005 not-for-profit corporation annual report without enclosing the check. Enclosed is a copy of the report we sent with new original signatures including the check.

For the Florida Foundation Volunteer Sertoma Club,

Crafg McCart