## **2005 NOT-FOR-PROFIT CORPORATION**

## **ANNUAL REPORT**

## OOLIMENT " NO4000044700



**FILED** Apr 22, 2005 8:00 am Secretary of State

04-22-2005 90274 027 \*\*\*\*61 25

1. Entity Name ENGLEWOOD CITIZENS FOR A SUSTAINABLE ENVIRONMENTAL LEARNING CENTER, INC.								04-22-2003	J02/4 02	.,, 01	. 23	
Principal Place of Business 359 W DEARBORN STREET ENGLEWOOD, FL 34223			Mailing Address 359 W DEARBORN STREET ENGLEWOOD, FL 34223									
2. Principal Place of Business			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.					02032005	Chg-NP	CR2E0	37 (10/03)	
City & State			City & State					4. FEI Number 20 – 2086768				oplied For ot Applicable
Zip		Country	Zip		Co	untry		5. Certificate	of Status Desired		\$8.75 Add Fee Require	
	6. Name	and Address of Current F	Registere	d Agent		Name	WAR	7. Name and REN, R.	Address of New EARL	Registered .	Agent	'
WARREN, 359 W DE		STREET							BORN°ST	म् जन्म स्थिति		······································
ENGLEWO							339	W DEAR	BURN 51	KEEI		
						City	ENG	LEWOOD		FL	3i422	<u>*3</u>
		ty submits this statement for stered agent.	r the purpo	ose of changing its	register	red office or	register	ed agent, or bot	h, in the State of f	lorida. I am	familiar with,	, and accept
lile obligat	ions on egis	agent.										•
SIGNATURE.												
	Signature, types	d or printed name of registered agent a	and title if app	licable. (NOT	E: Register	ed Agent signatu	ure required	when reinstating)	·	DATE		
	Filing Fe	d or printed name of registered agent a see is \$61.25 May 1, 2005	and title if appl	9. Election Cal Trust Fund	mpaign I	Financing		\$5.00 May B Added to Fees	Flo	Make chec orlda Depa	rtment of S	tate
10.	Filing Fe	ee is \$61.25		9. Election Cal Trust Fund (	mpaign I Contribu	Financing tion.		\$5.00 May B Added to Fees		Make chec orlda Depa	RECTORS IN	tate N 10
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DAVIS, A	ee is \$61.25 May 1, 2005		9. Election Ca	mpaign I Contribu  11. TITL NAM	Financing tion.	D DAV	\$5.00 May B Added to Fees ADDITIONS/CHA	ANGES TO OFFICE FEROLD	Make chec orida Depar CERS AND DI	rtment of S	tate
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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. Thomas J. Geriak, Pres. SIGNATURE: SIGNATURE AND TYPE OF (941) 474-7793

## 2005 NOT-FOR-PROFIT CORPORATION ATTACHMENT

- 4 · · · · ·		AITITO	AL NEP	OK:		_						
1. Entity Name ENGLEWO	OD CIT	# N040000 IZENS FOR A LEARNING C	SUSTAINA									
Principal Place of 359 W DEARBO ENGLEWOOD, F	ORN STREE	Ŧ	359 W	Mailing Address 359 W DEARBORN STREET ENGLEWOOD, FL 34223				20041474				
9 Principal Place	on of Punio	···	2 1400	10 Marie Carron				•				
2. Principal Place Suite, Apt. #.	:			3. Mailing Address  Suite, Apt. #, etc.				00000005		47	T.	
			<u>:</u>					02032005 Chg-	NP	CR2E03		
City & State			City	City & State				4. FEI Number	<u>.</u>		Not	Applicable
Zip Country			Zip	Zip Country				5. Certificate of Statu:	s Desired		8.75 Addit see Required	
	6. Name	and Address of Cui	rent Registere	d Agent				7. Name and Addres	s of New Re	gistered A	gent	
eran . Gran de Line	ini Albert					Name Street Ad	dress (	P.O. Box Number is Not	Acceptable)			
	277					City Pt Zip			Zip Code			
										FL	Zip Code	
SIGNATURE	Signature, types	or printed name of registere	d agent and title if app	9. Election Ca Trust Fund	ampaign f	inancing	re required	s5.00 May Be			payable to	
.	Due by I	Way 1, 2005		rustiruna	Contribut	uon. I	<u> </u>	Added to Fees	, · · · · · ·	os nebar	inent of Su	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		OFFICERS AN	ND DIRECTORS	☐ Delete		Æ .	DEV 98	ADDITIONS/CHANGES ENY. GIOVA HOURGLASS ICE, FL 34	NNA DRIVE	RS AND DI	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			-	☐ Delete		ME HEET ADDRESS		LIN. JOHN DIANE CIR LEWOOD, FL		3	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,			Delete	■ ■	ME REET ADDRESS	230	OER, DENNI DARTMOUTH ICE, FL 34	RD.		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete							☐ Change	☐ Addition
TITLE NAME STREET AODRESS CITY-ST-ZIP				☐ Delete	STI	le .me reet address ry.st-zip					Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delets	ST	ile Ame Reet Address Ty-St-Zip					☐ Change	☐ Addition
indicated of the cor	on this reproperation of or on an a	port or supplemental r the receiver or truste attachment with an ad	report is true and se empowered a dress, with all o	accurate and that execute this representation of the empower.	at my sign ort as req ed. Thoma	nature shall i uired by Ch	nave the apter 6	Section 119.07(3)(i), Flore same legal effect as if 117. Florida Statutes; and riak, Pres	made under I that my nan	oath; that I ne appears	am an office in Block 10 c	r or director or Block 11 if
1		BIGNATURE AND TY	PEU UHPHHATED N	ME OF SIGNING OFFIC	-EM OH DIRE	CUIUM			Dete		Daytime Phone #	