2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 23, 2004 8:00 am Secretary of State

DOCUMENT # N06114 1. Entity Name NORTHEAST PENSACOLA SERTOMA CLUB, INC.						04-23-200	4 90269	006 ****6	51.25
Principal Place 4715 BAYOU PENSACOLA,	BLVD.	Mailing Address P.O. BOX 10697 PENSACOLA, FL 32504	•				. ,		1191 8 1 1891
2. Principal Place of Business 3. M		3. Mailing Address	Mailing Address				B	1211 BIBN BIBN B131	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04152004	Chg-NP	CR2E0	37 (10/03)	
City & State		City & State			4. FEI Number 59-2417	459			plied For t Applicable
Zip	Country	Zip	Country		5. Certificate of	of Status Desired		\$8.75 Add	
	6. Name and Address of Current F	Registered Agent			7. Name and	Address of New	Registered	Agent	
BROCHU, WILLIAM R 945 FARMINTON ROAD- PENSACOLA, FL 32504			Name Street A	ddress (F	2.0. Box Numbe	r is Not Acceptab	ole)		
			City				FI	Zip Cod	e
8. The above	named entity submits this statement for	the purpose of changing its	registered office or	r registere	ed agent, or both	, in the State of F	• •		and accept
	ions of registered agent.		J	_					
SIGNATURE .	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE	: Registered Agent signat	ure required	when reinstating)		DATE		
Filing Fee is \$61.25 Due by May 1, 2004									
•	_	9. Election Carr Trust Fund C	npaign Financing Contribution.		\$5.00 May Be Added to Fees	Flo	Make cheo orida Depa	ck payable to	o late
10.	Due by May 1, 2004 OFFICERS AND DIR	Trust Fund C	ontribution.	<u> </u>	Added to Fees	Flo	orida Depa	IRECTORS IN	late
10. TITLE: NAME STREET ADDRESS	OFFICERS AND DIR OTWELL, CHIP 1804 E CROSS ST	Trust Fund C	11. TITLE NAME STREET ADDRESS	9 3E8	Added to Fees ADDITIONS/CHA ASTIAN 1 95 HERN	STEVE UTAGE DE	erida Depa	rtment of S	late
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIR OTWELL, CHIP 1804 E CROSS ST PENSACOLA, FL 32503	Trust Fund C	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	3 3E8 64 PE	Added to Fees ODITIONS/CHA ASTIAN, 95 HERN TN SACOL	NGES TO OFFICE STEVE MITAGE DE A, FL 32	erida Depa	Introduction of Signature of Si	110
10. TITLE: NAME STREET ADDRESS	OFFICERS AND DIR OTWELL, CHIP 1804 E CROSS ST	Trust Fund C	11. TITLE NAME STREET ADDRESS	9 SEE 64 PE	Added to Fees ADDITIONS/CHA ASTIAN, 95 HERN TNSACOL	NGES TO OFFICE STEVE STAGE DE A, FL 32	orida Depa EERS AND D	IRECTORS IN	late
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIR OFFICERS AND DIR P OTWELL, CHIP 1804 E CROSS ST PENSACOLA, FL 32503 VPD	Trust Fund C	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	SER 64 PE CAR 436	Added to Fees ADDITIONS/CHA ASTIAN, 95 HERN TNSACOL	STEVE UITAGE DE AI FL 32 EL CIRCL	orida Depa EERS AND D	Introduction of Signature of Si	110
10. TITLE: NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DIR OFFICERS AND DIR P OTWELL, CHIP 1804 E CROSS ST PENSACOLA, FL 32503 VPD CARRO, MICHAEL 4369 DE4VENEUX CIRCLE	Trust Fund C	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	SER 64 PE CAR 436	Added to Fees ADDITIONS/CHA A STIAN, G5 HERN TN SACOC RO, MICHA G DEVER	STEVE UITAGE DE AI FL 32 EL CIRCL	orida Depa EERS AND D	Introduction of Signature of Si	110
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Due by May 1, 2004 OFFICERS AND DIR P OTWELL, CHIP 1804 E CROSS ST PENSACOLA, FL 32503 VPD CARRO, MICHAEL 4369 DE4VENEUX CIRCLE PENSACOLA, FL 32504 D KENAN, DAN	Trust Fund C	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	SER G4 PE CAR 436 PEN	Added to Fees ADDITIONS/CHA ASTIAN, 95 HERA ENSACOC RO, MICHA 9 DEVER	STEVE UITAGE DE AI FL 32 EL CIRCL	orida Depa EERS AND D	IRECTORS IN ☐ Change ☐ Change	10 Addition Addition
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12. I hereby certify that the information supplied with this filling 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 of 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.

SIGNATURE:

William R Brochn
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
WILLIAM R. BROCHN

4/15/04

850-435-8887

Daytime Phone #