

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15253

FILED
May 01, 2005
Secretary of State

Entity Name: LAKELAND ASSEMBLIES COTILLION CLUB, INC.

Current Principal Place of Business:

3918 CANYON LAKE POINT
P.O. BOX 6202 (33807)
LAKELAND, FL 33813

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6202
LAKELAND, FL 33807 US

New Mailing Address:

FEI Number: 59-1917966 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

RUTHVEN, KIMBERLY P
1416 BRIARWOOD LANE
LAKELAND, FL 33803 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SMITH, ROBIN
Address: 5015 HANCOCK LAKE RD.
City-St-Zip: LAKELAND, FL 33813

Title: V () Delete
Name: SCHICHTEL, CAROLINE
Address: 5015 HANCOCK LAKE RD.
City-St-Zip: LAKELAND, FL 33813

Title: TD () Delete
Name: RUTHVEN, KIM
Address: 1416 BRIARWOOD CT.
City-St-Zip: LAKELAND, FL 33803

Title: TD () Delete
Name: MELTON, LAURIE
Address: 1717 PINEBERRY CT.
City-St-Zip: LAKELAND, FL 33803

Title: SD (X) Delete
Name: HUTCHINSON, KELLY
Address: 6858 HAYTER CT.
City-St-Zip: LAKELAND, FL 33813

Title: SD () Delete
Name: GONZALEZ, LEAH
Address: 4019 CHAVERLY DR. W
City-St-Zip: LAKELAND, FL 33813

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: SCHICHTEL, CAROLINE
Address: 2310 CAMBRIDGE AVENUE
City-St-Zip: LAKELAND, FL 33803

Title: VP (X) Change () Addition
Name: HOLLIS, BEVERLY
Address: 1385 JEFFERSON DRIVE
City-St-Zip: LAKELAND, FL 33803

Title: TRS (X) Change () Addition
Name: RUTHVEN, KIM
Address: 1416 BRIARWOOD LANE
City-St-Zip: LAKELAND, FL 33803

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KIM RUTHVEN

TRS

05/01/2005

Electronic Signature of Signing Officer or Director

Date