## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N15930

FILED Jan 07, 2005 Secretary of State

Entity Name: THE NATIONAL GUARD OFFICERS ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
P.O. BOX	E STREET 3446  STINE, FL 32	0850446			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
P.O. BOX	E STREET 3446 ISTINE, FL 32	0850446			
El Number	: 59-2628455	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	Current Registered Agent:	Name and Address	s of New Registered Agent:	
JACKSON The above	AN JOSE BLV VILLE, FL 322	257 US	ourpose of changing its registe	red office or registered agent, or both,	
	<b>Э</b> Г.				
SIGNATUI					
SIGNATUI		nic Signature of Registered Ag	ent	Date	
				Date  GES TO OFFICERS AND DIRECTORS	
	Electron S AND DIREC	TORS:  Delete NA			
OFFICER: Title: Name: Address:	Electron S AND DIRECT S ( FRANTZ, DONI P.O. BOX 1008 ST. AUGUSTIN	TORS: Delete NA E, FL 32085 Delete	ADDITIONS/CHAN Title: Name: Address:	GES TO OFFICERS AND DIRECTORS	
DFFICER: Title: lame: laddress: City-St-Zip: Title: lame: laddress:	Electron  S AND DIRECT  S ( FRANTZ, DONI P.O. BOX 1008 ST. AUGUSTIN  D ( BUTLER, HANI P O BOX 3446 ST AUGUSTINE	TORS:  Delete NA  E, FL 32085  Delete E, FL 32085	ADDITIONS/CHAN  Title: Name: Address: City-St-Zip:  Title: Name: Address:	GES TO OFFICERS AND DIRECTORS  ( ) Change ( ) Addition	
DFFICER: Title: value:	Electron  S AND DIRECT  S ( FRANTZ, DONI P.O. BOX 1008 ST. AUGUSTIN  D ( BUTLER, HANP P O BOX 3446 ST AUGUSTINE  P ( BALSKUS, JOS 82 MARINE ST ST AUGUSTINE	TORS: Delete NA E, FL 32085 Delete E, FL 32085 Delete E, FL 3085	ADDITIONS/CHAN  Title: Name: Address: City-St-Zip:  Title: Name: Address: City-St-Zip:  Title: Name: Address: Address: City-St-Zip:	GES TO OFFICERS AND DIRECTORS  ( ) Change ( ) Addition  ( ) Change ( ) Addition	

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: MARY E. PAUL MRS. 01/07/2005