## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N20424

FILED Jan 14, 2005 Secretary of State

Entity Name: ST. GEORGE ISLAND CHARITY COOK-OFF AUCTION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 432 W BAYSHORE DR ST GEORGE ISLAND, FL 32328 US **Current Mailing Address: New Mailing Address:** 432 W BAYSHORE DR ST GEORGE ISLAND, FL 32328 US FEI Number: 59-2915451 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BAMBURG, JAYNE 432 W BAYSHORE DR ST GEORGE ISLAND EASTPOINT, FL 32328 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BAMBURG, JAYNE Q Name: Name: 432 W BAYSHORE DR Address: Address: City-St-Zip: ST GEORGE ISLAND, FL 32328 City-St-Zip: Title: VPD Title: VPD ( ) Delete (X) Change ( ) Addition EDMISTON, H L Name: EDMISTON, H L Name: Address: PO BOX 298 NA Address: PO BOX 291 City-St-Zip: APALACHICOLA, FL City-St-Zip: APALACHICOLA, FL 32329 Title: () Delete Title: STD (X) Change ( ) Addition ABBOTT, JAY W LIPSCOMB, LATICIA F Name: Name: 419 W SAWYER ST 153 LAS BRISAS DRIVE Address: Address: City-St-Zip: ST. GEORGE ISLAND, FL 32328 City-St-Zip: EASTPOINT, FL 32328 Title: STD () Delete Title: D (X) Change ( ) Addition Name: LIPSCOMB, TICIA Name: ABBOTT, JAY 419 NORTH SAWYER STREET Address: 60 E GULF BEACH DR Address: City-St-Zip: ST GEORGE ISLAND, FL 32328 City-St-Zip: ST GEORGE ISLAND, FL 32328 Title: () Delete Title: ( ) Change (X) Addition BANKS, BRANT Name: Name: P.O. BOX 187 Address: Address: City-St-Zip: City-St-Zip: APALACHICOLA, FL 32329 Title: () Delete Title: ( ) Change (X) Addition OGLES, ROY Name: Name: Address: Address: 114 NORTH BAYSHORE DRIVE EASTPOINT, FL 32328 City-St-Zip: 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: LATICIA F. LIPSCOMB STD 01/14/2005