2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20912

FILED Jan 07, 2005 Secretary of State

Entity Name: SIGNAL 8-2 CLUB OF FLORIDA, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
14222 EAS	AM G BACKES STMOUNT RD HILL, FL 34609	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
14222 EAS	AM BACKES STMOUNT RD HILL, FL 34609	US			
FEI Number:		FEI Number Applied For ()	FEI Number Not Applicable (X)	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:	
BACKES, WILLIAM G. 14222 EASTMOUNT RD SPRING HILL, FL 34609 US				BACKES, WILLIAM G 14222 EASTMOUNT RD SPRING HILL, FL 34609 US	
	e named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: WILLIAM G BACKES				01/07/2005	
	Electroni	c Signature of Registered Age	ent	Date	
OFFICERS	S AND DIRECT	ORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	VP () HEFFERNAM, JI 572 GARDENIA TITUSVILLE, FL	CIR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () SPARACIA, ANG 11056 THOMBE SPRING HILL, F	RRY DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () GRIFFENKRANZ 10 PENNYPACK PALM COAST, F	ER LN	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () HESLIN, PATRIC 2009 MEADOW SPRING HILL, F	LARK ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () GROZIER, TOM 307 MYRTLE AV NOKOMIS, FL 3		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST () BACKES, WILLI 14222 EAST MC SPRING HILL, F	OUNT ROAD	Title: Name: Address: City-St-Zip:	() 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: WILLIAM G BACKES S/T 01/07/2005