

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 14, 2005
Secretary of State**

DOCUMENT# N24328

Entity Name: CHARLOTTE HARBOR CHAPTER OF NSPI, INC.

Current Principal Place of Business:

2811 TAMIAMI TR
D
PORT CHARLOTTE, FL 33952 US

New Principal Place of Business:

Current Mailing Address:

2811 TAMIAMI TR
D
PORT CHARLOTTE, FL 33952 US

New Mailing Address:

FEI Number: 65-0127624 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROOKS, MITCHELL T
258 BANGSBERG RD SE
PT CHARLOTTE, FL 33952 US

Name and Address of New Registered Agent:

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: P () Delete
Name: TERHUNE, FRED
Address: 4288 PINNACLE ST
City-St-Zip: PT CHARLOTTE, FL 33980

Title: VP () Delete
Name: COCCARO, PETER
Address: 18380 PAULSON DR
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: T/S () Delete
Name: BAUBLITZ, SAM
Address: 4507 9TH ST W SUITE #-1-8
City-St-Zip: BRADENTON, FL 34207

Title: PP () Delete
Name: MCTIGUE, COLIN
Address: 19800 VETERANS HWY
City-St-Zip: PT CHARLOTTE, FL 33954

Title: D () Delete
Name: JAMISON, SHELLY
Address: 26266 BARCELOS CT
City-St-Zip: PUNTA GORDA, FL 33983

Title: D () Delete
Name: HUBER, KATHIE
Address: 120 A RICH ST
City-St-Zip: VENICE, FL 34292

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: FRED TERHUNE

P

04/14/2005

Electronic Signature of Signing Officer or Director

Date