

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**

**Feb 19, 2004 08:00 AM  
Secretary of State**

<b>DOCUMENT # N29008</b> 1. Entity Name DUGOUT NO. 271, SECTOR OF FLORIDA, NATIONAL ORDER OF TRENCH RATS, INCORPORATED	
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Principal Place of Business % LARRY O. KYSER 1701 BAINBRIDGE AVE. PENSACOLA FL 32507 US	Mailing Address % LARRY O. KYSER 5749 WINDEMERE TRACE MILTON FL 32-5710 US
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2. Principal Place of Business  Suite, Apt. #, etc.	3. Mailing Address  Suite, Apt. #, etc.
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City & State  Zip	City & State  Zip
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4. FEI Number <b>59-2948993</b>	Applied For <input type="checkbox"/> Not Applicable
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MOORE CR2E037 (11/03)

5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  <b>HEINEY, CHARLES 5749 WINDEMERE TRACE PACE FL 32571</b>	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b> Zip Code</span>
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Charles Heiney* 2-16-2004  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2004</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>Make Check Payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD KYSER, LARRY O. <input type="checkbox"/> Delete 7115 PRINCESS LANE PENSACOLA FL 32526
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV JACKSON, CARL H SR. <input type="checkbox"/> Delete 6911 OLSEN ROAD PENSACOLA FL 32506
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV FERGUSON, HARMON S <input type="checkbox"/> Delete 5132 MULDOON STREET CRESTVIEW FL 32539
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV VANCE, GEORGE W <input type="checkbox"/> Delete 121 SPRINGWOOD CIR. CRESTVIEW FL 32536
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PCD DEAN, GLENNIS C <input type="checkbox"/> Delete 2903 LONGLEAF DRIVE PENSACOLA FL 32526
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV HEINEY, CHARLES E <input type="checkbox"/> Delete 5749 WINDEMERE TRACE PACE FL 32571

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <div style="text-align: center; font-size: small;">                         U00000058386                          02/20/04-80028-003 61.25                     </div>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Charles Heiney* 2-16-2004 850 994 9491  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #