

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 29, 2004
Secretary of State**

DOCUMENT# N41620

Entity Name: CENTRAL FLORIDA HERPETOLOGICAL SOCIETY, INC.

Current Principal Place of Business:

PO BOX 783324
WINTER GARDEN, FL 34777 US

New Principal Place of Business:

PO BOX 5350
WINTER PARK, FL 32793 US

Current Mailing Address:

PO BOX 783324
WINTER GARDEN, FL 34777 US

New Mailing Address:

PO BOX 5350
WINTER PARK, FL 32793 US

FEI Number: 59-3116401 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TILLIS, JEFFREY A
106 TANGERINE DR
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

BEITELMAN, VICTOR E
8312 CHESTNUT KEY COURT
204
ORLANDO, FL 32825 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: VICTOR E. BEITELMAN 04/29/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CONCANNON, PAUL
Address: 40 GARDEN AVE
City-St-Zip: WINTER GARDEN, FL 34787

Title: T () Delete
Name: TILLIS, JEFFERY A
Address: 106 TANGERINE DR
City-St-Zip: SANFORD, FL 32771

Title: VD () Delete
Name: PETERS, JAMES
Address: 2075 KIMBERWICKE CIR
City-St-Zip: OVIEDO, FL 32765

Title: DS () Delete
Name: CONLEY, BRIAN
Address: 26420 SW HWY 42
City-St-Zip: UMATILLA, FL 32784

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PETERS, JAMES E
Address: 2075 KIMBERWICKE CIRCLE
City-St-Zip: OVIEDO, FL 32765 US

Title: T (X) Change () Addition
Name: ST.CYR, MYRON D
Address: 5628 LONG LAKE HILLS BLVD.
City-St-Zip: ORLANDO, FL 32810 US

Title: VD (X) Change () Addition
Name: SARGENT, DENNIS M
Address: 6510 TUSCAWILLA DRIVE
City-St-Zip: LEESBURG, FL 34748 US

Title: DS (X) Change () Addition
Name: BEITELMAN, VICTOR E
Address: 8312 CHESTNUT KEY COURT #204
City-St-Zip: ORLANDO, FL 32825

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: JAMES PETERS D 04/29/2004
Electronic Signature of Signing Officer or Director Date