2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 20, 2005 8:00 am Secretary of State 01-20-2005 90035 048 ****61.25

1. Entity Nam	MENT # N42304 O SOCIETY OF MODEL R	AILROAD	ERS, INC.				01-20-2	005 9003:	5 048 ****(61.25	
C/O JOHN V. BAUM C/O 213 SOUTH SWOOPE 410 MAITLAND, FL 32751 US LON		C/O PA 410 BL	ling Address) Paul G. Santello 0 Budleigh Salterton Cl NGWOOD, FL 32779 US					11 2/41 2 1214 21411	50003:		
			Aailing Address								
Suite, Apt. #, etc.		Suite	Suite, Apt. #, etc.			01132005	Chg-NP	CR2E	(10/03)		
City & State		City 8	City & State			4. FEI Number 59-305			<u> </u>	oplied For of Applicable	
Zip	Country	Zip		Country		5. Certificate	of Status Desire	ed 🗆	\$8.75 Add Fee Require		
 .	6. Name and Address of Curren	t Registered	Agent			7. Name and	Address of Ne	w Registere	d Agent		
BAUM, JOHN V.					Name						
213 SOUTH SWOOPE MAITLAND, FL 32741 3275 /				Street A	Street Address (P.O. Box Number is Not Acceptable)						
	The state of the s			City			<u>-</u> .		2ip Cod	e	
9 The above	named entity submits this statement f	or the purpos	e of changing its re-		r register	ad agent, or bot	h in the State	Florida La	<u> </u>		
the obligat	lons of registered agent.	J. 2. 2 P. 1	- 0. 5./_/.g.//g //.5 //.	9.0.0.00	···ogioto		in in all olding	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , , , , , , , , , , , , , , , ,	and dooopt	
SIGNATURE .	Signature, typed or printed name of registered ager	nt and title d applica	ble. (NOTE: R	egistered Agent signal	beriuper enul	when reinstating)		DATI	I		
SIGNATURE	Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campa Trust Fund Cor	aign Financing		\$5.00 May B		Make che Florida Dep	eck payable t eartment of S	tate	
10.	Filling Fee Is \$61.25 Due by May 1, 2005 OFFICERS AND D		9. Election Campa Trust Fund Cor	aign Financing htribution.		\$5.00 May B Added to Fees	NGES TO OFF	Make che Florida Dep	eck payable to artment of S	tate	
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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 charged, or on an attachment with an address, with all other like empowered.

407-645-5325