2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2004 8:00 am
Secretary of State
04-16-2004 90104 005 ****61.25

DOCUMENT # N48441

1. Entity Name
EGLIN FEDERAL PRISON CAMP EMPLOYEES' CLUB, INC.

Principal Place of Business	Mailing Address
FLAGLER RD BLDG 591 EGLIN AFB, FL 32542	EMPLOYEE'S CLUB EGLIN PRISON CAMP P.O. BOX 600 EGLIN AFB, FL 32542-7606 US

01082004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
INVERNESS ROAD	
Suite, Apt. #, etc. BLDG. 50501	Suite, Apt. #, etc.
City & State EGLIN AFB, FL. 32542	City & State
Zip / Country 32542 / USA	Zip / Country

4. FEI Number
NOT APPLICABLE
☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ALDERMAN, DAVID R FLAGLER RD BLDG 591 EGLIN AFB, FL 32542	Name ALDERMAN, DAVID R. Street Address (P.O. Box Number is Not Acceptable) INVERNESS ROAD BLDG 50501 City: EGLIN AFB **FL** Zip Code: 32542

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 _____ 1-9-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ALDERMAN, DAVID R FLAGLER RD., BLDG. 591 EGLIN AFB, FL 32542	☐ Delete	PD ALDERMAN, DAVID INVERNESS ROAD BLDG 50501 EGLIN AFB, FL. 32542	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV NELSON, KARI M FLAGLER RD BLDG 591 EGLIN AFB, FL 32542	☐ Delete	DV GRAHAM, DANNY INVERNESS ROAD BLDG 50501 EGLIN AFB, FL. 32542	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD GARDECKI, SHARON FLAGLER RD., BLDG. 591 EGLIN AFB, FL 32542	☐ Delete	SA DARIOTIS, ELENI INVERNESS ROAD BLDG 50501 EGLIN AFB, FL. 32542	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD PENFOLD, MICHELLE FLAGLER RD., BLDG. 591 EGLIN AFB, FL 32542	☐ Delete	TD PENFOLD, MICHELLE INVERNESS ROAD BLDG 50501 EGLIN AFB, FL. 32542	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ 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: _____ 1-9-04 (850) 729-8266
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #