

#61-25

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

APPROVED
AND
FILED

05 MAY 10 PM 6:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04292005 Chg-NP

CR2E037 (10/03)

MRD

4. FEI Number
59-3526075

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KRETZER, JOHN
524 SOUTH BEACH STREET
DAYTONA BEACH, FL 32114

7. Name and Address of New Registered Agent

Name KRETZER, JOHN
Street Address (P.O. Box Number is Not Acceptable)
524 S. BEACH STREET
City DAYTONA BEACH FL Zip Code 32114

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

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, 2005

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PD	WHITMAN, JAMES	524 S BEACH STREET, APT 207	DAYTONA BEACH, FL 32114	<input checked="" type="checkbox"/>
P	KRETZER, JOHN	524 S BEACH STREET, APT 203	DAYTONA BEACH, FL 32114	<input type="checkbox"/>
S	JOHNSON, ELLA	524 S BEACH ST #912	DAYTONA BEACH, FL 32114	<input type="checkbox"/>
TD	MUNGER, BESSIE	524 S BEACH STREET #G-111	DAYTONA BEACH, FL 32114	<input checked="" type="checkbox"/>
T	BRICKEY, LILLIE	524 S. BEACH STREET, #704	DAYTONA BEACH, FL 32114	<input checked="" type="checkbox"/>
TD	PARK, LARRY	524 S BEACH ST	DAYTONA BEACH, FL 32114	<input checked="" type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
PRESIDENT	KRETZER, JOHN	524 S BEACH ST. APT. 203	DAYTONA BEACH, FL 32114	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
TREASURER	NELSON, LINDA	524 S. BEACH ST. 707	DAYTONA BEACH, FL 32114	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PARLIAMENTARIAN	CUZNER, FRANK	524 S. BEACH ST. APT. #411	DAYTONA BEACH, FL 32114	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/05

Daytime Phone #