## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000001399

Entity Name: REFUGE PINELLAS, INC.

FILED Jul 12, 2005 Secretary of State

Current P	rincipal Place of Business:	New Principal Place of Business:
	ST. NORTH	
SAINT PE	TERSBURG, FL 33714 US	
Current N	lailing Address:	New Mailing Address:
4224 28TH ST. NORTH ST. PETE, FL 33714		3209 56TH WAY NORTH ST. PETE, FL 33710
	: 59-3281311 FEI Number Applied For() ace with s. 607.193(2)(b), F.S., the corporation did	FEI Number Not Applicable ( ) Certificate of Status Desired (X) not receive the prior notice.
Name and	Address of Current Registered Agent:	Name and Address of New Registered Agent:
	OTT LAN BLVD NE RSBURG, FL 33704 US	
	e named entity submits this statement for the e of Florida.	e purpose of changing its registered office or registered agent, or be
SIGNATUI		
	Electronic Signature of Registered A	gent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECT
Title: Name: Address: City-St-Zip:	D ( ) Delete WRIGHT, BRUCE 4434 6TH AVE N ST PETERSBURG, FL 33713	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete MCCUTCHEN, JOE 1543 HWY 138 S.E., SUITE 336 CONYERS, GA 30013	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D ( ) Delete SYKES, MANUEL 2901 54 AVE S SAINT PETERSBURG, FL 33712	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D ( ) Delete THOMPSON, DON 2215 SUNSET DRIVE BRADENTON, FL 34207	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete MILEY, JIM 240 WHALEN AVE SICKLERVILLE, NJ 08081	Title: D (X) Change ( ) Addition Name: SEGALL, DENNIS Address: 4507 NORTH NEBRASKA AVE. City-St-Zip: TAMPA, FL 33603
Title: Name: Address: City-St-Zip:	D () Delete MILLER, GLENN 4224 28TH ST N SAINT PETERSBURG, FL 33714	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:

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: BRUCE WRIGHT D 07/12/2005