2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001671

Entity Name: FIRST COAST ROMANCE WRITERS, INC.

FILED Feb 06, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4820 JOSEPH STREET P. O. BOX 32465

HASTINGS, FL 32145 JACKSONVILLE, FL 32237 US

Current Mailing Address: New Mailing Address:

4820 JOSEPH STREET P. O. BOX 32465

HASTINGS, FL 32145 JACKSONVILLE, FL 32237 US

FEI Number: 59-3225490 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SMITH, MARGUERITE E CROSS, PAMELA J MS. 4820 JOSEPH STREET 403 ARRICOLA AVENUE

HASTINGS, FL 32145 US US ST. AUGUSTINE, FL 32080

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: PAMELA J. CROSS 02/06/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

JACKSONVILLE, FL 32218

City-St-Zip:

Name:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

MIDDLEBURG, FL 32068 US

VΡ (X) Change () Addition () Delete WATERS, HEATHER RIDGELL, TERRI A MS. Name: Name: 3144 RIDEOUT LANE Address: 23793 FLORA PARK BLVD. Address:

City-St-Zip: MIDDLEBURG, FL 32068 City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: DT () Delete Title: (X) Change () Addition CROSS, PAMELA Name: GREENLAND, SHANNON MS. Name: Address:

L103 APRICOLA AVE Address: 2976 A FIRST AVENUE City-St-Zip: SAINT AUGUSTINE, FL 32080 City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: DS Title: (X) Change () Addition () Delete

MILLER, E. J. Name: CROSS, PAMELA J MS. Name: 2839 SOUTHAMPTON DRIVE 403 ARRICOLA AVE. Address: Address:

City-St-Zip: MIDDLEBURG, FL 32068 City-St-Zip: ST. AUGUSTINE, FL 32080 US

(X) Change () Addition Title: DM () Delete Title:

Name: WILSON, DOLORES Name: MILLER, E. J MS. 2839 SOUTHHAMPTON DRIVE Address: 1561 TISON ROAD Address:

Title: () Delete Title: (X) Change () Addition

MARGUERITE, SMITH GOLDMAN, EILEEN MS. Name: Name: 4820 JOSEPH STREET 3251 REMLER DRIVE Address: Address: City-St-Zip: HASTINGS, FL 32145 City-St-Zip: JACKSONVILLE, FL 32223 US

Title: () Delete Title: (X) Change () Addition

KATHLEEN, MCMAHON TOOKE, ANITA MS. Name: Address: 14654 POTANOW TRAIL Address: 2831 WINDERMERE COURT MIDDLEBURG, FL 32068 US ORLANDO, FL 32837 City-St-Zip: 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.

City-St-Zip:

SIGNATURE: PAMELA J. CORSS Т 02/06/2005