2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002916

FILED May 18, 2004 Secretary of State

Entity Name: WEST PUTNAM ATHLETIC ASSOCIATION, INC.

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

P. O. BOX 1832

INTERLACHEN, FL 32148

Current Mailing Address: New Mailing Address:

P. O. BOX 1832

INTERLACHEN, FL 32148

FEI Number: 59-3009985 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:

LEVINE, MARK S 245 EAST VIRGINIA ST. TALLAHASSEE, FL 32301 US

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:

- Flateria Circulus I Davidoud Acad

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TPD () Delete Title: TPD (X) Change () Addition Name: SHUROCK, THOMAS L Name: TRULL, BRYAN

Address: 138 WALL LAKE ROAD Address: 135 PARK STREET
City-St-Zip: MELROSE, FL 32666 City-St-Zip: INTERLACHEN, FL 32148

Title: VPD () Delete Title: VPD (X) Change () Addition Name: TRULL, BRIAN Name: RICKETTS, THOMAS

Address: 507 CHANDLER STREET Address: 117 SANDPIPER DRIVE
City-St-Zip: INTERLACHEN, FL 32148 City-St-Zip: HAWTHORNE, FL 32640

Title: TD () Delete Title: () Change () Addition

 Name:
 SHUROCK, VALERIE
 Name:

 Address:
 138 WALL LAKE TR
 Address:

 City-St-Zip:
 MELROSE, FL 32147
 City-St-Zip:

 $\label{eq:title:S} {\sf Title:S} \qquad \qquad {\sf S} \qquad {\sf (A) Change (A) Addition}$

Name:RICKETTS, GLENDAName:WEAVER, COLENEAddress:117 SANDPIPER DRIVEAddress:104 CANOE DRIVECity-St-Zip:HAWTHORNE, FL 32640City-St-Zip:INTERLACHEN, FL 32148

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: BRYAN TRULL TPD 05/18/2004