

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003381

FILED
Sep 06, 2005
Secretary of State

Entity Name: COCOA BEACH CITYEMPLOYEES FUND, INC.

Current Principal Place of Business:

2 SOUTH ORLANDO AVENUE
COCOA BEACH, FL 32931

New Principal Place of Business:

Current Mailing Address:

2 SOUTH ORLANDO AVENUE
COCOA BEACH, FL 32931

New Mailing Address:

FEI Number: 59-3259585 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BILLIAS, CHARLES
2 SOUTH ORLANDO AVENUE
COCOA BEACH, FL 32932 US

Name and Address of New Registered Agent:

BILLIAS, CHARLES
2 SOUTH ORLANDO AVENUE
COCOA BEACH, FL 32931 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: CHARLES BILLIAS

09/06/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MELINDA, KEESEE
Address: 2 S.ORLANDO AVE.
City-St-Zip: COCOA BEACH, FL 32932

Title: VPD () Delete
Name: HARMON, MICHAEL
Address: 2 S.ORLANDO AVE.
City-St-Zip: COCOA BEACH, FL 32932

Title: SD () Delete
Name: FAIN, CHRISTINE
Address: 2 S.ORLANDO AVE.
City-St-Zip: COCOA BEACH, FL 32932

Title: TD () Delete
Name: LEWANDOWSKI, STEVE
Address: 2 S ORLANDO AVENUE
City-St-Zip: COCOA BEACH, FL 32932

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: HUNSINGER, RHONDA
Address: 2 S.ORLANDO AVE.
City-St-Zip: COCOA BEACH, FL 32931

Title: SD (X) Change () Addition
Name: GILBERT, SHARON
Address: 2 S.ORLANDO AVE.
City-St-Zip: COCOA BEACH, FL 32931

Title: TD (X) Change () Addition
Name: LEWANDOWSKI, STEVE
Address: 2 S ORLANDO AVENUE
City-St-Zip: COCOA BEACH, FL 32931

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: MELINDA KEESEE

PD

09/06/2005

Electronic Signature of Signing Officer or Director

Date