## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000006036

Entity Name: CHAMPIONS TOUR WIVES, INC.

FILED Apr 01, 2005 Secretary of State

Current Principal Place of Business: Nev				ipal Place of Business:	
1201 HAYS		ICE COMPANY 1			
Current Mailing Address:			New Maili	New Mailing Address:	
POST OFFICE BOX 323 PONTE VEDRA BEACH, FL 32004 US					
FEI Number: 59-3299279 FEI Number Applied For ( )			FEI Number Not Appl	icable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CORPORA 1201 HAYS	TION SERVIC	E COMPANY			
	SEE, FL 3230	1 US			
The above in the State		ubmits this statement for the pu	irpose of changing i	ts registered office or registered agent, or both,	
SIGNATURE:					
	Electroni	c Signature of Registered Ager	nt	Date	
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	T () RACHELS, PIA 633 WEST LN AUBURN, AL 36	Delete 830	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	GREEN, MICHEL P.O. BOX 18198		Title: Name: Address: City-St-Zip:	P (X) Change ( ) Addition GREEN, MICHELLE 217 COUNTRY CLUB PARK PMB 103 BIRMINGHAM, AL 35213	
Title: Name: Address: City-St-Zip:	D ( ) I POOLEY, MARG POST OFFICE B TUCSON, AZ 85	OX 35352	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition STADLER, SUSAN 113 ELK CROSSING LANE EVERGREEN, CO 80439	
Title: Name: Address: City-St-Zip:	D () AHERN, TUDY 130 E. GLENDAI PHOENIX, AZ 8		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () HATALSKY, TRA 37 WINDSONG FAIRVIEW, NC		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	S () I EASTWOOD, DE 3313 EDITH LN. HALTOM CITY, 1		Title: Name: Address: Citv-St-Zip:	S (X) Change ( ) Addition EASTWOOD, DELL P.O. BOX 14769 HALTOM CITY TX 76117	

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: DELL EASTWOOD S 04/01/2005