

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Apr 29, 2004 08:00 AM  
Secretary of State

DOCUMENT # N95000000401

1. Entity Name  
THE PARKCHESTER SANTA CLAUS FUND, INC.



Principal Place of Business  
3518 EAST ROUNDTREE DRIVE  
COCOA, FL 32926

Mailing Address  
3518 EAST ROUNDTREE DRIVE  
COCOA, FL 32926



04092004 No Chg-NP CR2E037 (10/03)

4. FEI Number  
59-3290475

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MCGRATH, CHARLES A JR.  
3518 EAST ROUNDTREE DRIVE  
COCOA, FL 32926

DO NOT WRITE  
IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25  
Due by May 1, 2004

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

U000000141805  
04/30/04-80026-008 70.00

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
D  
MCGRATH, CHARLES A JR.  
STREET ADDRESS  
3518 EAST ROUNDTREE DRIVE  
CITY-ST-ZIP  
COCOA, FL 32926

TITLE  
NAME  
D  
MCGRATH, KELLY  
STREET ADDRESS  
3518 E ROUNDTREE  
CITY-ST-ZIP  
COCOA, FL 32926

TITLE  
NAME  
T  
MCGRATH, JO ELLEN  
STREET ADDRESS  
3518 EAST ROUNDTREE DRIVE  
CITY-ST-ZIP  
COCOA, FL 32926

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DO NOT WRITE  
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Rev. Charles A. McGrath Jr.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*DR.*  
Date

*321-633-3766*  
Daytime Phone #