

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000714

FILED
Feb 09, 2005
Secretary of State

Entity Name: CHARLOTTE COUNTRY MUSIC CLUB, INC.

Current Principal Place of Business:

C/O SHIRLEY ADEES
PUNTA GORDA, FL 339512746 US

New Principal Place of Business:

Current Mailing Address:

510898
PUNTA GORDA, FL 33951 US

New Mailing Address:

FEI Number: 65-0290398

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEGARIS, ROSS
3376 PEACE RIVER DR
HARBOR HEIGHTS, FL 33983 US

Name and Address of New Registered Agent:

GALLAGHER, JOHN
2005
RIVERBASIN DRIVE
PUNTA GORDA, FL 33982 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: JOHN GALLAGHER

02/09/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DEGARIS, ROSS
Address: 3376 PEACE RIVER DR
City-St-Zip: HARBOR HEIGHTS, FL 33983

Title: D () Delete
Name: SHAFER, MARGARET O
Address: 5017 KEY LARGO DRIVE
City-St-Zip: PUNTA GORDA, FL 33950

Title: D () Delete
Name: SHAFER, CHARLES
Address: 5017 KEY LARGO DR
City-St-Zip: PUNTA GORDA, FL 33950

Title: D () Delete
Name: TEWS, KEN
Address: 3359 PONCE RIVER DR.
City-St-Zip: HARBOR HEIGHTS, FL 33983

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GALLAGHER, JOHN
Address: 2005 RIVERBASIN DRIVE
City-St-Zip: PUNTA GORDA, FL 33982

Title: D (X) Change () Addition
Name: MILLER, GLORIA
Address: 23258 DELAVAN AVE
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: D (X) Change () Addition
Name: MASON, JULIE
Address: 4523 COLLINGSWOOD BLVD
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: D (X) Change () Addition
Name: MASON, JACK
Address: 4523 COLLINGSWOOD BLVD
City-St-Zip: PORT CHARLOTTE,, FL 33948

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: JOHN GALLAGHER

P

02/09/2005

Electronic Signature of Signing Officer or Director

Date