2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000741

FILED Feb 02, 2005 Secretary of State

Entity Name: MYSTIC ORDER OF BISCUITS OF ESCAMBIA COUNTY FLORIDA, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
336 FT. PI E-105	CKENS ROAD					
	DLA BEACH, FL	_ 32561				
Current Mailing Address:			New Maili	New Mailing Address:		
	CKENS ROAD					
E-105 PENSACC	DLA BEACH, FL	_ 32561				
El Number	: 59-3346193	FEI Number Applied For ()	FEI Number Not Appl	icable () Certificate of Status Desired ())	
Name and	l Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:		
KING, NAI	VCY E					
836 FT. PI E-105	CKENS ROAD					
	DLA BEACH, FL	_ 32561 US				
	e named entity s e of Florida.	submits this statement for the pu	urpose of changing i	ts registered office or registered agent, or b	oth,	
SIGNATUI	RE:					
	Electron	ic Signature of Registered Ager	nt	Date		
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OFFICERS AND DIREC	TOR	
ītle: lame:	D () BLACKMON, SH	Delete	Title: Name:	() Change () Addition		
\ddress:	4016 SATURN S	STREET	Address:			
City-St-Zip:	FLOWER MOU	ND, TX 75028	City-St-Zip:			
		Delete	Title:	() Change () Addition		
Name:	WALSH, JOE		Name:	() Change () Addition		
Name: Nddress:	WALSH, JOE 8242 NORTHPO	DINT BLVD.	Name: Address:	()Change ()Addition		
Name: Nddress:	WALSH, JOE	DINT BLVD.	Name:	()Change ()Addition		
Name: Address: City-St-Zip: Fitle:	WALSH, JOE 8242 NORTHPO PENSACOLA, F	DINT BLVD. L 32514 Delete	Name: Address: City-St-Zip: Title:	V (X) Change () Addition		
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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: NANCY E. KING A 02/02/2005