

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002659

FILED
Apr 09, 2005
Secretary of State

Entity Name: FIRST AMERICAN CULTURE & EDUCATION PRESERVATION ASSOCIATION, INC.

Current Principal Place of Business:

FIRST AMERICAN CULTURAL CENTER
19859 HWY 301 NORTH
STARKE, FL 32091 US

New Principal Place of Business:

Current Mailing Address:

19859 HWY 301 NORTH
STARKE, FL 32091 US

New Mailing Address:

FEI Number: 59-3327210

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNIGHT, RICHARD A DR.
547 SE 58TH ST
KEYSTONE HEIGHTS, FL 32656 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COOK, JESSE V
Address: 10360 W. ANCHORAGE ST.
City-St-Zip: HOMOSASSA, FL 34448

Title: S () Delete
Name: FERGUSON, DAVID
Address: 683 GILBERT ST.
City-St-Zip: BRONSON, FL 32621

Title: VP/T () Delete
Name: WHITE, ANTHONY D
Address: RT-2 BOX 842
City-St-Zip: LAKE BUTLER, FL 32054

Title: D () Delete
Name: WHITMORE, JACQUELINE
Address: 4219 NW 39 WAY
City-St-Zip: GAINESVILLE, FL 32606

Title: P () Delete
Name: MCCUTCHEN, WILLIAM N DR.
Address: 10951 NE 110TH AVE.
City-St-Zip: ARCHER, FL 32618

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP/T (X) Change () Addition
Name: WHITE, ANTHONY O
Address: RT-2 BOX 842
City-St-Zip: LAKE BUTLER, FL 32054

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

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

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: ANTHONY O. WHITE

VP/T

04/09/2005

Electronic Signature of Signing Officer or Director

Date