


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 22, 2004 08:00 AM
Secretary of State

DOCUMENT # N96000000268	
1. Entity Name BOY SCOUT TROOP 245, INC.	

Principal Place of Business 8120 N W 51 STREET LAUDERHILL, FL 33351 US	Mailing Address 8120 N W 51 STREET LAUDERHILL, FL 33351 US
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DO NOT WRITE IN THIS SPACE



01072004 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0475517	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fees Required
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6. Name and Address of Current Registered Agent
SCHROEDER, RICHARD 8120 N W 51 STREET LAUDERHILL, FL 33351

**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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHROEDER, RICHARD 8120 N W 51 STREET LAUDERHILL, FL 33351
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SOLIS, RITA 3130 N W 106 AVENUE SUNRISE, FL 33351
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SWIFT, DONNA 1060 CEDAR CREEK WAY DAVIE, FL 33325
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: Richard Schroeder (RICHARD SCHROEDER) 19 JAN 04 954851-8085
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #