


**FILED**  
**Feb 16, 2004 8:00 am**  
**Secretary of State**

02-16-2004 90044 046 \*\*\*\*61.25

**2004 NOT-FOR-PROFIT CORPORATION  
 ANNUAL REPORT**

<b>DOCUMENT # N96000002130</b>					
<b>1. Entity Name</b> EDWARD W. PENNO AUXILIARY TO POST NO. 4864 LADIES AUXILIARY TO THE VETERANS OF FOREIGN WARS OF T					
Principal Place of Business 10199 NORTH CITRUS SPRINGS BLVD. CITRUS SPRINGS, FL 34434			Mailing Address 10199 NORTH CITRUS SPRINGS BLVD. CITRUS SPRINGS, FL 34434		
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
<b>5. Name and Address of Current Registered Agent</b>				<b>7. Name and Address of New Registered Agent</b>	
MARTIN, MARY L 251 W. HOMEWAY LOOP CITRUS SPRINGS, FL 34434				Name Street Address (P.O. Box Number is Not Acceptable) City	
				FL Zip Code	
<b>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.</b>					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2004		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be</b> Added to Fees	
<b>Make check payable to          Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ZIECH, FAY 246 SW ERIC DR DUNNELLON, FL 344343935	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Fay Ziech 2465 W. Eric Dr. Citrus Springs, Fl. 34434	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SRVP CRIST, DORIS E 1895 W. BELGRADE DR CITRUS SPGS, FL 344344924	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SRVP Stella Shepherd 1895 W. Belgrade Dr. Citrus Springs, Fl. 34434	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FOCHT, ELIZABETH 8823 SW 196TH AVE RD DUNNELLON, FL 344322633	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MARTIN, MARY L 251 W. HOMEWAY LOOP CITRUS SPRINGS, FL 34434	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR BURNETT, LOIS 8823 SW 196TH AVE RD DUNNELLON, FL 344322633	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR Lois Burnett 2479 W. Eric Dr. Citrus Springs, Fl. 34434	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR SCHWARTZ, CHARANN PO BOX 640104 BEVERLY HILLS, FL 34464	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>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.</b>					
<b>SIGNATURE:</b> <i>Mary L. Martin</i> <b>MARY L. MARTIN</b> Feb. 12, 2004 352-489-2009 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

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