2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002685

Entity Name: PYCC COUNCIL, INC.

FILED Jan 06, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2201 PASADENA PLACE GULFPORT, FL 33707 **Current Mailing Address: New Mailing Address:** C/O ANDREW J GILL 5950 PELICAN BAY PLAZQ SUITE 1101A GULFPORT, FL 33707 US FEI Number: 59-3382970 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BACON, DAVID A 2959 1ST AVENUE NORTH SAINT PETERSBURG, FL 337130682 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition PERONI, LARRY Name: Name: 2201 PASADENA PLACE Address: Address: GULFPORT, FL 33707 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition GILL, ANDREW J Name: Name: Address: 5950 PELICAN BAY PLAZA Address: City-St-Zip: GULFPORT, FL 33707 City-St-Zip: Title: () Delete Title: () Change () Addition CAMPBELL, CLAUDIA Name: Name: Address: 7930 SUN ISLAND S #304 Address: City-St-Zip: SAINT PETERSBURG, FL 33706 City-St-Zip: Title: VD () Delete Title: () Change () Addition KEATING, EDMUND Name: Name: 6228 PASADENA PT BLVD Address: Address: City-St-Zip: GULFPORT, FL 33707 City-St-Zip: Title: () Delete Title: () Change () Addition NICKLAS, HARRY Name: Name: 6 PARIDISE LANE Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33706 City-St-Zip: Title: () Delete Title: () Change () Addition KAPPOS, GEORGE Name: Name: Address: 5940 PELICAN BAY PLAZA, #702B Address: GULFPORT, FL 33707 City-St-Zip: 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: ANDREW J GILL TD 01/06/2005