2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 15, 2005
Secretary of State

DOCUMENT# N96000005567

Entity Name: CARROLLWOOD SERTOMA CLUB, INC.

Current Principal Place of Business:

13014 N DALE MABRY
PMB 531
TAMPA, FL 33618 US

New Principal Place of Business:

Current Mailing Address:

13014 N DALE MABRY
PMB 531
TAMPA, FL 33618 US

New Mailing Address:

FEI Number: 59-3284678 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

REEDER, RICK
3339 W BEARSS AVE
TAMPA, FL 33618 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: SD ( ) Delete
Name: MILLAR, CONNIE
Address: 13014 N. DALE MABRY #531
City-St-Zip: TAMPA, FL 33618

Title: PD ( ) Delete
Name: NIELSEN, DICK
Address: 13014 N DALEMARBY #531
City-St-Zip: TAMPA, FL 33618

Title: TD ( ) Delete
Name: JOHNSON, MARY JANE
Address: 13014 N DALEMARBY #531
City-St-Zip: TAMPA, FL 33618

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change ( ) Addition
Name: MUTCHLER, JODIE
Address: 13014 N. DALE MABRY #531
City-St-Zip: TAMPA, FL 33618

Title: PD (X) Change ( ) Addition
Name: AHERN, ROBERT
Address: 13014 N DALEMARBY #531
City-St-Zip: TAMPA, FL 33618

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: MARY JANE JOHNSON TD 08/15/2005

Electronic Signature of Signing Officer or Director — Date