

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001446

FILED
Feb 23, 2005
Secretary of State

Entity Name: CENTRAL FLORIDA CHAPTER OF THE SOCIETY OF COST ESTIMATING AND ANALYSIS, INC.

Current Principal Place of Business:

2437 STONE CROSS CIRCLE
ORLANDO, FL 32828 US

New Principal Place of Business:

4222 MENDENWOOD LANE
ORLANDO, FL 32828 US

Current Mailing Address:

2437 STONE CROSS CIRCLE
ORLANDO, FL 32828 US

New Mailing Address:

4222 MENDENWOOD LANE
ORLANDO, FL 32828 US

FEI Number: 59-3507278

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOYER, PAUL V ESQ.
815 ORIENTA AVE
SUITE G
ALTAMONTE SPRINGS, FL 32701 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: P () Delete
Name: SEAVERS, GREG
Address: 2437 STONE CROSS CIRCLE
City-St-Zip: ORLANDO, FL 32828

Title: VP () Delete
Name: MCMILLIAN, TINA
Address: 833 OAK MANOR CIRCLE
City-St-Zip: ORLANDO, FL 32825

Title: T () Delete
Name: RUWE, JOE
Address: 4222 MENDENWOOD LANE
City-St-Zip: ORLANDO, FL 32826

Title: D () Delete
Name: NEWTON, LEON
Address: 1748 SPARKLING WATER CIR
City-St-Zip: OCOEE, FL 34761

Title: D () Delete
Name: OCQUE, JAMES
Address: 122 BERKSHIRE CIR E
City-St-Zip: LONGWOOD, FL 32779

Title: D (X) Delete
Name: COOK, JAMES
Address: 871 SPIREA DR
City-St-Zip: ROCKLEDGE, FL 32955

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CURRY, MARGARET E
Address: 833 HELM AVE, NW
City-St-Zip: PALM BAY, FL 32907

Title: VP (X) Change () Addition
Name: EUZIERE, CARTER
Address: 600 MYRTLEWOOD WAY
City-St-Zip: MELBOURNE, FL 32940

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

Title: S (X) Change () Addition
Name: MCMILLIAN, TINA
Address: 833 OAK MANOR CIRCLE
City-St-Zip: ORLANDO, FL 32825

Title: D (X) Change () Addition
Name: SEAVERS, GREG
Address: 3159 WINDCHIME CIRCLE SOUTH
City-St-Zip: APOPKA, FL 32703

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: GREG SEAVERS

D

02/23/2005

Electronic Signature of Signing Officer or Director

Date