

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001387

FILED
Jan 12, 2005
Secretary of State

Entity Name: PORT CHARLOTTE COMMUNITY-CIVIC IMPROVEMENT ASSOCIATION, INC.

Current Principal Place of Business:

1181 DEWHURST ST
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

21450 BEAVERTON AVE.
PORT CHARLOTTE, FL 33952

Current Mailing Address:

P.O. BOX 494221
PORT CHARLOTTE, FL 339494221

New Mailing Address:

21450 BEAVERTON AVE.
PORT CHARLOTTE, FL 33952

FEI Number: 59-2170539

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TEZA, ROBERT M
1181 DEWHURST ST
PORT CHARLOTTE, FL 33952 US

Name and Address of New Registered Agent:

HARTER, CARL H TREAS.
21450 BEAVERTON AVE
PORT CHARLOTTE, FL 33952 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: CARL H. HARTE TREAS

01/12/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TEZA, ROBERT
Address: 1181 DEWHURST ST
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D () Delete
Name: PETERSON, ELLEN
Address: 20275 MT. PROSPECT AVE.
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D () Delete
Name: JENKINS, RUBENA
Address: 3111 PELHAM BLVD.
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: D () Delete
Name: PERIERA, ROSALEEN
Address: 2482 LEVALI ST
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: VPD () Delete
Name: PEARSALL, KATHRYN
Address: 1156 LYLE ST
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D () Delete
Name: DEUBEL, KEN
Address: 442 KOSTNER STREET
City-St-Zip: PORT CHARLOTTE, FL 33954

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HARTE, JOAN A MRS
Address: 21450 BEAVERTON AVE.
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D (X) Change () Addition
Name: WHITE, EVELYN
Address: 23422 ELIZABETH AVE
City-St-Zip: PORT CHARLOTTE, FL 33980

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

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

Title: VPD (X) Change () Addition
Name: DAVIS, MARCUS
Address: 23246 GOLDCOAST AVE.
City-St-Zip: PORT CHARLOTTE, FL 33980

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: JOAN A HARTE

PD

01/12/2005

Electronic Signature of Signing Officer or Director

Date