

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
05 MAR 10 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N98000003305 1. Entity Name MONSTER CLUB FOUNDATION SERVICES, INC.					
Principal Place of Business 1551 SANDSPUR ROAD MAITLAND, FL 32751			Mailing Address POST OFFICE BOX 4961 ORLANDO, FL 32802-4961		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		 01042005 Chg-NP CR2E037 (10/03)	
City & State		City & State			
Zip Country		Zip Country			
4. FEI Number 59-3519114				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent B&C CORPORATE SERVICES OF CENTRAL FLORIDA 390 NORTH ORANGE AVENUE ORLANDO, FL 32801				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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.					
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, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State.					
10. OFFICERS AND DIRECTORS					
TITLE	NAME	Delete	TITLE	NAME	Change Addition
	D GINSBURG, RONALD 1551 SANDSPUR ROAD MAITLAND, FL 32751	<input checked="" type="checkbox"/>		P LOWERY, BETTY MARTINEZ 1600 W. COLONIAL DR. ORLANDO, FL 32804	<input type="checkbox"/> <input checked="" type="checkbox"/>
	D GINSBURG, SHARON L 1551 SANDSPUR ROAD MAITLAND, FL 32751	<input checked="" type="checkbox"/>		VP KRAMER, HOPE 4680 LAKE UNDERHILL ROAD ORLANDO, FL 32807	<input type="checkbox"/> <input checked="" type="checkbox"/>
	D GINSBURG, ALAN 1551 SANDSPUR ROAD MAITLAND, FL 32751	<input checked="" type="checkbox"/>		S JEPPESEN, NANCY 34 KEYES COURT SANFORD, FL 32773	<input type="checkbox"/> <input checked="" type="checkbox"/>
		<input type="checkbox"/>		T BROWN, DIANE J. 520 N. SEMORAN BLVD., STE 230 ORLANDO, FL 32807	<input type="checkbox"/> <input checked="" type="checkbox"/>
		<input type="checkbox"/>		D STOUT, JAN 1551 SANDSPUR ROAD MAITLAND, FL 32751	<input type="checkbox"/> <input checked="" type="checkbox"/>
		<input type="checkbox"/>		D FULMORE, CORA 730 NINTH STREET WINTER GARDEN, FL 34787	<input type="checkbox"/> <input checked="" type="checkbox"/>
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.					
SIGNATURE: <u>JAN STOUT, DIRECTOR</u> Date: <u>3/9/05</u> Daytime Phone #: <u>407/741-8502</u>					