## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000003430

Entity Name: ROSKAMP CHARITIES, INC.

FILED Apr 15, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1226 N. TAMIAMI TRAIL, STE. 100 2040 WHITFIELD AVENUE SARASOTA, FL 34236 SARASOTA, FL 34243

Current Mailing Address: New Mailing Address:

ROSKAMP CHARITIES, INC. 2040 WHITFIELD AVENUE 1226 N. TAMIAMI TRAIL, STE. 100 SARASOTA, FL 34243

SARASOTA, FL 34236

FEI Number: 65-0845374 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:

ROSKAMP, BRIAN R
1226 N. TAMIAMI TRAIL, STE. 100
SARASOTA, FL 34236 US
MIDDLEBROOKS, J. HUGH
200 SOUTH ORANGE AVENUE
SARASOTA, FL 34236 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: J. HUGH MIDDLEBROOKS 04/15/2005

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D ( ) Delete Title: P,D (X) Change( ) Addition

Name: ROSKAMP, ROBERT G Name: ROSKAMP, ROBERT G
Address: 1226 N. TAMIAMI TRAIL, STE. 100 Address: 2040 WHITFIELD AVENUE

City-St-Zip: SARASOTA, FL 34236 City-St-Zip: SARASOTA, FL 34243

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: ROSKAMP, DIANE S Name: ROSKAMP, DIANE S

Address: 1226 N. TAMIAMI TRAIL, STE. 100 Address: 2040 WHITFIELD AVENUE City-St-Zip: SARASOTA, FL 34236 City-St-Zip: SARASOTA, FL 34243

 $\label{eq:title:start} \mbox{Title:} \qquad \mbox{ST} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{ST} \qquad \mbox{(X) Change () Addition}$ 

Name:ROSKAMP, BRIANName:ROSKAMP, BRIANAddress:1226 N. TAMIAMI TRAIL, STE. 100Address:2040 WHITFIELD AVENUECity-St-Zip:SARASOTA, FL 34236City-St-Zip:SARASOTA, FL 34243

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: ROBERT G. ROSKAMP P 04/15/2005