## 2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## **DOCUMENT # N98000003748**

1. Entity Name
OKEECHOREE CORRECTIONAL EMPLOYEE'S CLUB,



09-22-2004 90001 002 \*\*\*\*61.25

Sep 22, 2004 8:00 am Secretary of State

**FILED** 

INC.					
Principal Place of Business DEPT. OF CORR. OKEE: CORRECTNL. INST. 3420 NE 168TH STREET OKEECHOBEE, FL 34972		Mailing Address DEPT. OF CORR . OKEE. CORRECTNL. INST. 3420 NE 168TH STREET OKEECHOBEE, FL 34972			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		08032004 Chg-NP	CR2E037 (10/03)
City & State		City & State		4. FEI Number 59-000654	Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent					
SHEFFIELD, TIM.					
	CORR . OKEE. CORRECTNI	INST	Street Address	s (P.O. Box Number is Not Acceptable	(e)
	68TH STREET	L. 11101.	Of Corr. Olec. Co	RRECTUL. Inst	
OKEECHOBEE, FL 34972				NE 168th Street	
			City 57/	t d	Zip Code
			OKCE	echobee	FL 34472
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.					
_	Shanoon !	20hack 4/2	Sidont		8/25/04
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE					
	Signature, typod or printed marke or registered age.	1100000	giotoroa rigori algi-mano todini		
Filing Fee is \$61.25  9. Election Campaign Financing  \$5.00 May Be  Due by September 8, 2004  9. Election Campaign Financing  Added to Fees  Florida Department of State					
10,	OFFICERS AND D	IRECTORS	11.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 10
TITLE	s	Delete	TITLE Se	cretary	Change Addition
NAME	THARR, NATILIE	·	NAME ST	naron Bennett	•
STREET ADDRESS	3420 NE 168TH STREET		STREET ADDRESS 34	20 NE 168495+	
CITY-ST-ZIP	OKEECHOBEE, FL 34972		CITY-SI-ZIP OK	leechobee, F1 349	7み
TITLE	DT	☐ Delete	TITLE VP		Change Addition
HAME	UNDERWOOD, LAURIE		NAME CO	nely Hingle in et	
STREET ADDRESS	3420 NE 168TH STREET	•	STREET ADDRESS 34	20 NE 768th St	
CITY-ST-ZIP	OKEECHOBEE, FL 34972		CITY-ST-ZIP OK	leechobee, F1 34	1413
TITLE	PDT	Delete	TITLE		Change
NAME	SHEFFIELD, TIM		NAME	•	Ì
STREET ADDRESS	3420 NE 168TH STREET		STREET ADDRESS CITY-ST-ZIP		
CITY-ST-ZIP	OKEECHOBEE, FL 34972				
TITLE	VPTS	Delete 🛴	1111	a a Calant	Change Addition
name Street address	SHANNON, ROBERT  3420 NE 168TH STREET		STREET ADDRESS   Zur.	annon, Robert 30 NE 168th Street	-
CITY-ST-ZIP	OKEECHOBEE, FL 34972		CITY-ST-ZIP	eechobee, Fl 3497	2
TITLE	VPST 1	Delete	TITLE VP	eechouse, Fi our	Change Addition
NAME	EADES, RICHARD	Descrie		teus Diane	
STREET ADDRESS	3420 NE 168TH STREET		STREET ADDRESS 34	treus, Diane 20 NE 16841str	ect
CITY-ST-ZIP	OKEECHOBEE, FL 34972		CITY-ST-ZIP	eechobee . Fl 349	r2
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		-
STREET ADDRESS			STREET ADDRESS	•	1
CITY-ST-ZIP	<u>'</u>		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filling 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.					
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAND OFFICER OR DIRECTOR

8/25/04

863-763-2717 Daytime Phone #