## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000004491

FILED May 11, 2005 Secretary of State

Entity Name: FORT WALTON BEACH JAYCEES FOUNDATION, INC.

**New Principal Place of Business: Current Principal Place of Business:** P.O. BOX 722 FT. WALTON BEACH, FL 32549 **Current Mailing Address: New Mailing Address:** P.O. BOX 722 FT. WALTON BEACH, FL 32549 FEI Number: 59-3522061 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MELVIN, JARRETT 220 FLIVA AVENUE FT. WALTON BEACH, FL 32548 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Delete (X) Change ( ) Addition CRAWFORD, MIKE CRAWFORD, MIKE Name: Name: 707 AVE DU FOUTANE BLEAU 707 AVE DU FOUTANE BLEAU Address: Address: City-St-Zip: MARY ESTHER, FL 32596 City-St-Zip: MARY ESTHER, FL 32596 US Title: MV Title: (X) Change ( ) Addition ( ) Delete SMITH, JASON Name: MOORE, KAMA Name: Address: 155 CLIFFORD STREET Address: 8 WEDGEWOOD LANE City-St-Zip: FORT WALTON BEACH, FL 32548 City-St-Zip: FORT WALTON BEACH, FL 32547 US Title: () Delete Title: (X) Change ( ) Addition FLEISCHMAN, CARRIE HALEY, DEANNA Name: Name: 2053 ROBERTS DRIVE 48 SNOOK ROAD Address: Address: City-St-Zip: FORT WALTON BEACH, FL 32547 City-St-Zip: FORT WALTON BEACH, FL 32569 US Title: STD ( ) Delete Title: (X) Change ( ) Addition KARPOICZ, CHRISTOPHER MELVIN, JARRETT Name: Name: 415 SHERRY CIRCLE Address: Address: 220 FLIVA AVENUE City-St-Zip: FORT WALTON BEACH, FL 32548 City-St-Zip: FORT WALTON BEACH, FL 32548 US Title: (X) Delete Title: () Change () Addition KIDWELL, SUSAN Name: Name: 415 SHERRY CIRCLE Address: Address: City-St-Zip: FORT WALTON BEACH, FL 32548 City-St-Zip: Title: (X) Delete Title: () Change () Addition MOORE, KAMA Name: Name: Address: 8 WEDGEWOOD LANE Address: FORT WALTON BEACH, FL 32547 City-St-Zip: 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: KAMA MOORE T 05/11/2005