

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000657

FILED
Mar 10, 2005
Secretary of State

Entity Name: SPANISH AMERICAN COMMUNITY CLUB PORT ST. LUCIE CHAPTER, INC.

Current Principal Place of Business:

2195 SE AIROSA
PORT SAINT LUCIE, FL 34984 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 8213
PORT ST LUCIE, FL 34985 US

New Mailing Address:

FEI Number: 31-1663658

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTRO, JOSE
2199 ABCAR RD SE
PORT ST. LUCIE, FL 34952 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: JACKSON, VICENTE
Address: 461 SE STARFISH AVE.
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: P () Delete
Name: CASTRO, JOSE M
Address: 2199 ABCOR RD SE
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: D () Delete
Name: ROSA, LUIS
Address: 1426 S.E. MARISOL LANE
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: D () Delete
Name: RIVERA, MARGI
Address: 1358 S.E. VESTRIDGE LANE
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: D () Delete
Name: GONZALEZ, CRUZ
Address: 2351 S.E. HURLEY COURT
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: S () Delete
Name: DE JESUS, MARIA
Address: 215 SE VOLTAIRE TERRACE
City-St-Zip: PORT SAINT LUCIE, FL 34983

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: JOSE CASTRO

V.P.

03/10/2005

Electronic Signature of Signing Officer or Director

Date