2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2005
Secretary of State

DOCUMENT# N99000001312

Entity Name: FLORIDA OLDTIMERS' HOCKEY ASSOCIATION, INC.

Current Principal Place of Business:

5997 SANDY LANE
WESLEY CHAPEL, FL 335445122

New Principal Place of Business:

Current Mailing Address:

5997 SANDY LANE
WESLEY CHAPEL, FL 335445122

New Mailing Address:

FEI Number: 59-3573325 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRACE, CHARLENE E
5997 SANDY LANE
WESLEY CHAPEL, FL 335445122 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: DANN, NORMAN E
Address: 5997 SANDY LANE
City-St-Zip: WESLEY CHAPEL, FL 335445122

Title: D ( ) Delete
Name: BRACE, CHARLENE E
Address: 5997 SANDY LANE
City-St-Zip: WESLEY CHAPEL, FL 335445122

Title: D ( ) Delete
Name: ARMSTRONG, NEIL
Address: 6426 RENWICK CIRCLE
City-St-Zip: TAMPA, FL 33647

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:

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: CHARLENE E. BRACE D 01/10/2005

Electronic Signature of Signing Officer or Director Date