

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2005 8:00 am
Secretary of State

01-12-2005 90004 019 ****61.25

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1. Entity Name
**FLORIDA WEST COAST RESOURCE CONSERVATION
AND DEVELOPMENT COUNCIL, INC.**



Principal Place of Business
**945 25TH DRIVE EAST
SUITE 11
ELLENTON, FL 34222**

Mailing Address
**945 25TH DRIVE EAST
SUITE 11
ELLENTON, FL 34222**

50001745



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01072005

Chg-NP

CR2E037 (10/03)

City & State

City & State

4. FEI Number
31-1654804

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

**CONNOR, JR, JOHN J
11075 TAYLOR GRADE ROAD
DUETTE, FL 33834-6866**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME O'CONNOR JR, JOHN J
STREET ADDRESS 11075 TAYLOR GRADE RD
CITY-ST-ZIP DUETTE, FL 338346866

TITLE Director ☐ Change ☒ Addition
NAME Dr. Carolyn Gugo
STREET ADDRESS 2900 RINGLING BLVD
CITY-ST-ZIP Sarasota, FL

TITLE D ☐ Delete
NAME HUNSICKER, CHARLIE
STREET ADDRESS PO BOX 1000
CITY-ST-ZIP BRADENTON, FL 34206

TITLE Director ☐ Change ☒ Addition
NAME NINA Burwell
STREET ADDRESS 3051 Allenwood St.
CITY-ST-ZIP Sarasota, FL 34232

TITLE D ☒ Delete
NAME SOSADEETER, MIKE
STREET ADDRESS 4048 OLIVE AVE.
CITY-ST-ZIP SARASOTA, FL 34231

TITLE Secretary/Treasurer ☒ Change ☐ Addition
NAME Sosadeeter, Mike
STREET ADDRESS 4048 Olive Ave.
CITY-ST-ZIP Sarasota, FL 34231

TITLE NONE ☐ Delete
NAME TOMPKINS II, H CHRISTOPHER
STREET ADDRESS 1706 SOUTH KING AVE
CITY-ST-ZIP BRANDON, FL 335116216

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VPD ☐ Delete
NAME ALLEYNE, JOHN DR.
STREET ADDRESS 13265 120TH LANE N.
CITY-ST-ZIP LARGO, FL 33778

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME MORRIS, CLIVE
STREET ADDRESS 4713 LORRAINE ROAD
CITY-ST-ZIP BRADENTON, FL 34202

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE:

John J. Connor Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/7/05 941 723-3252