2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2005 8:00 am
Secretary of State
01-10-2005 90025 015 ****61.25

DOCUMENT # N99000002247

1. Entity Name
SEDRA INC.

Principal Place of Business	Mailing Address
C/O CAREN I. STAUFFER 5510 HOWELL BRANCH ROAD WINTER PARK, FL 32762	C/O CAREN I. STAUFFER 5510 HOWELL BRANCH ROAD WINTER PARK, FL 32762

01072005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3637533 ☐ Applied For ☐ Not Applicable

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
STUFFER, CAREN 5570 HOWELL BRANCH RD WINTER PARK, FL 32792	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BURKS, LYNNETTE 13400 RUNNING WATER RD PALM BEACH GARDENS, FL 33418	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Ruth Ann McMahon 12257 Jandy Run Jupiter, FL 33478	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD GARDNER, GAYLE 5105 PORTER RD. WHITE SPRINGS, FL 32096	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Ginn, Jayne 18124 126th Terr. N Jupiter, FL 33478	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MEYER, DEENA 10155 S FORESTLINE AVE INVERNESS, FL 34452	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Maris Ramsey 13209 CR561A Clermont FL 34711	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MASK, NORA 1120 N LAKEWOOD OCOEE, FL 34761	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Caren Stauffer 5510 Howell Br Rd Winter Park FL 32792	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ASD THOMPSON, CAROL 3715 PENNSYLVANIA AVE MIMS, FL 32754	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	RSD GINN, JAYNE 18124 126TH TERR N JUPITER, FL 33478	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	RSD Anita Cowch 11552 162nd PL Jupiter, FL 33478	☑ Change ☐ Addition

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: Caren Stauffer
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #