

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003828

FILED
Apr 10, 2005
Secretary of State

Entity Name: SEA ROCKET CHAPTER OF FLORIDA, INC.

Current Principal Place of Business:

1455 CONCORD AVE.
MERRITT ISLAND, FL 32952

New Principal Place of Business:

Current Mailing Address:

PO BOX 1095
COCOA, FL 329231095

New Mailing Address:

FEI Number: 59-3583536

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENRY, BARBARA
708 WATERMILL DRIVE
MERRITT ISLAND, FL 32952 US

Name and Address of New Registered Agent:

BERNTSON, PAULA
1455 CONCORD AV
MERRITT ISLAND, FL 32952 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: KATRINA HOLTEN FOR PAULA BERNTSON

04/10/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HENRY, BARBARA
Address: 708 WATERMILL DRIVE
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D () Delete
Name: BERNTSON, PAULA
Address: 1455 CONCORD AVE.
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D () Delete
Name: BRUCKLER, JENNIFER
Address: 4010 BARR LANE
City-St-Zip: TITUSVILLE, FL 32796

Title: D () Delete
Name: HOLTEN, KATRINA
Address: 5729 LORD STREET
City-St-Zip: SCOTTSMOOR, FL 32775

Title: D (X) Delete
Name: HILL, GAIL
Address: 2155 REYNARD PLACE
City-St-Zip: MERRITT ISLAND, FL 32952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: SZUCHY, EILEEN
Address: 2035 ROCKLEDGE DR
City-St-Zip: ROCKLEDGE, FL 32955

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: KATRINA HOLTEN

D

04/10/2005

Electronic Signature of Signing Officer or Director

Date