

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004338

FILED
Jul 05, 2005
Secretary of State

Entity Name: TREASURE COAST JUNIOR ROWING ASSOCIATION, INC.

Current Principal Place of Business:

1955 SW CRANE CREEK AVE
PALM CITY, FL 34990

New Principal Place of Business:

Current Mailing Address:

3250 S. KANNER HWY
STUART, FL 34994

New Mailing Address:

FEI Number: 65-0935604 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BRODIE, LAWRENCE P
525 CAMDEN AVENUE
STUART, FL 34994 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: DP () Delete
Name: VELINSKY, DENISE
Address: 1955 SW CRANE CREEK AVE
City-St-Zip: PALM CITY, FL 34990

Title: DV () Delete
Name: POWELL, RON
Address: 1199 SW SUNDOWN COURT
City-St-Zip: PALM CITY, FL 34990

Title: D () Delete
Name: KUHNS, SCOTT
Address: 94 S. RIVER RD
City-St-Zip: STUART, FL 34996

Title: DT () Delete
Name: VELINSKY, DANIEL
Address: 1955 SW CRANE CREEK AVE
City-St-Zip: PALM CITY, FL 34990

Title: D () Delete
Name: FLUTIE, SUSAN
Address: 2611 PINECREST LAKES BLVD.
City-St-Zip: JENSEN BEACH, FL 34957

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
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: DENISE K. VELINSKY

PRES

07/05/2005

Electronic Signature of Signing Officer or Director

Date