

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 21, 2005 08:00 AM
Secretary of State

DOCUMENT # N99000004649	
1. Entity Name PASCO BIG BOOK INC.	

Principal Place of Business 7137 EDNA HUDSON, FL 34669	Mailing Address 7137 EDNA HUDSON, FL 34669
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DO NOT WRITE IN THIS SPACE



04192005 No Chg-NP CR2E037 (10/03)

4. FFI Number 59-3563489	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent PERKINS, MICHELLE 12805 WINDING WAY HUDSON, FL 34667	
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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 in printed name of registered agent and State of Florida. (NOTE: This is not a legal signature. It is only for identification purposes.)

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EDMONSTONE, CHARLES A 9520 BRUSH LANE HUDSON, FL 34667
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZUNT, GARY 12308 LONGHORN DR HUDSON, FL 34667
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PERKINS, MICHELLE 12805 WINDING WAY HUDSON, FL 34667
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04/21/05-80051-012 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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: *[Signature]* **Director Gary Zunt** **4-20-05**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR