2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004924

Jul 07, 2005 Secretary of State

Entity Name: MAKE A DIFFERENCE FISHING TOURNAMENT, INC.

Current Principal Place of Business: New Principal Place of Business:

2063 ATTACHE COURT 2063 ATTACHE COURT PALM HARBOR, FL 34683 CLEARWATER, FL 33764 US

Current Mailing Address: New Mailing Address:

PO BOX 16536 PO BOX 16536

CLEARWATER, FL 33766 US

FEI Number: 59-3587905 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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: Name and Address of New Registered Agent:

TURNER, CHARLIE 2063 ATTACHE COURT CLEARWATER, FL 33764 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:

- Flackwaria Cianakura of Davisharad Anauk

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

OZONA, FL 34660

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: C () Delete Title: C-D (X) Change () Addition

 Name:
 WIEGARD, STEVE
 Name:
 WIEGAND, STEVE

 Address:
 1957 SEVER DR
 Address:
 1957 SEVER DR

City-St-Zip: CLEARWATER, FL 33764 City-St-Zip: CLEARWATER, FL 33764

Title: PRA () Delete Title: P-RA (X) Change () Addition Name: TURNER, CHARLIE Name: TURNER, CHARLIE

Address: 2063 ATTACHE CT Address: 2063 ATTACHE CT
City-St-Zip: CLEARWATER, FL 33764 City-St-Zip: CLEARWATER, FL 33764

Title: SD () Delete Title: VP (X) Change () Addition

 Name:
 TIERNAN, MATTHEW
 Name:
 TIERNAN, MATTHEW

 Address:
 505 ORANGE STREET
 Address:
 505 ORANGE STREET

 City-St-Zip:
 PALM HARBOR, FL 34683
 City-St-Zip:
 PALM HARBOR, FL 34683

Title: V () Delete Title: D (X) Change () Addition

 Name:
 LEWELLYN, DAWN
 Name:
 LEWELLYN, DAWN

 Address:
 3015 WHISPERING DR S
 Address:
 3015 WHISPERING DR S

City-St-Zip: LARGO, FL 33771 City-St-Zip: LARGO, FL 33771

Title: V () Delete Title: D-S (X) Change () Addition Name: SCHAFFER, TOM Name: FREE, TOM

Address: 329 12TH AVE Address: 3086 OAKBROOK CIRCLE
City-St-Zip: INDIAN ROCKS BEACH, FL 33785 City-St-Zip: CLEARWATER, FL 33759

City-St-Zip: INDIAN ROCKS BEACH, FL 33785 City-St-Zip: CLEARWATER, FL 33759

Title: V () Delete Title: D-T (X) Change () Addition

Name: TIERNAN, MATT Name: SUSAN, DAVIDSON
Address: PO BOX 533 Address: 3629 NETTLE CREEK COURT

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.

City-St-Zip:

HOLIDAY, FL 34691

SIGNATURE: STEVE WIEGAND C-D 07/07/2005