## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000004977

FILED Apr 21, 2005 Secretary of State

Entity Name: FLORIDA ORACLE APPLICATIONS USER GROUP, INC.

**Current Principal Place of Business: New Principal Place of Business:** 116 GARDEN GATE DRIVE 116 GARDEN GATE DRIVE PONTE VEDRA, FL 32802 PONTE VEDRA, FL 32082 **Current Mailing Address: New Mailing Address:** 116 GARDEN GATE DRIVE 116 GARDEN GATE DRIVE PONTE VEDRA, FL 32802 PONTE VEDRA, FL 32082 FEI Number: 65-0948113 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VERSTEEG, NEIL W 116 GARDEN GATE DRIVE PONTE VEDRA, FL 32802 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BATCHELOR, RICHARD Name: Name: 4555 RIVERSIDE DRIVE Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: PAPA, TONY Name: Address: 1188 LINWOOD LOOP Address: City-St-Zip: JACKSONVILLE, FL 32259 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition EDINGER, TAMMY SAMADNEJAD, KATHY Name: Name: 4980 BAYLINE DRIVE Address: Address: 277 CLOVER COURT City-St-Zip: NORTH FT MYERS, FL 33917 City-St-Zip: JACKSONVILLE, FL 32259 Title: TD () Delete Title: () Change () Addition Name: VERSTEEG, NEIL Name: 116 GARDEN GATE DRIVE Address: Address: City-St-Zip: PONTE VEDRA, FL 32082 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition ABDULKADER, LOUISE GABOUREL, TIRZAH Name: Name: 9319 PINE MEADOWS CT 4555 RIVERSIDE DRIVE Address: Address: PALM BEACH GARDENS, FL 33410 City-St-Zip: ORLANDO, FL 32825 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: NEIL VERSTEEG TD 04/21/2005