## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000007571

FILED Jan 05, 2005 Secretary of State

Entity Nan	ne: CINDY CL	JSANO MEMORIAL FUND, INC	O.		
Current Pr	incipal Place	of Business:	New Principal Place	New Principal Place of Business:	
JOHN A. C 14470 SW : DAVIE, FL	31ST PL.				
Current Ma	ailing Address	s:	New Mailing Addres	New Mailing Address:	
JOHN A. C 14470 SW : DAVIE, FL	31ST PL.				
FEI Number:	65-0963025	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and				of New Registered Agent:	
	31ST PL. 33330 US named entity s	ubmits this statement for the p	urpose of changing its registere	ed office or registered agent, or both,	
in the State SIGNATUR					
SICINATON		c Signature of Registered Age	nt	Date	
OFFICERS	AND DIRECT	ORS:	ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () CUSANO, JOHN 14470 S.W. 31 F DAVIE, FL 3333	PLACE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VPD () WILKINS, DONN 3617 BANCROF KENNESAW, GA	T MAIN	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () MCCABE, PHYL 322 W. HORNBE LONGWOOD, FI	EAM DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: JOHN CUSANO P/D 01/05/2005