


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2005 8:00 am
Secretary of State

02-17-2005 90021 015 ***150.00

DOCUMENT # P97000015603 1. Entity Name CREDIT UNION 24, INCORPORATED					
Principal Place of Business 3773 COMMONWEALTH BOULEVARD TALLAHASSEE, FL 32303			Mailing Address 3773 COMMONWEALTH BOULEVARD TALLAHASSEE, FL 32303		
2. Principal Place of Business 2473 Care Drive		3. Mailing Address 2473 Care Drive			
Suite, Apt. #, etc. Suite 1		Suite, Apt. #, etc. Suite 1			
City & State Tallahassee, Fl.		City & State Tallahassee, FL			
Zip 32308	Country Leon	Zip 32308	Country Leon	4. FEI Number 59-3486863	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PARK, JAMES H 3773 COMMONWEALTH BOULEVARD TALLAHASSEE, FL 32303			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C JACOBS, LARRY 2735 BROOKWOOD DRIVE ORANGE PARK, FL 32073 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCOTT, R. LARRY 2511 N.W. 41ST STREET GAINESVILLE, FL 32605 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Cromer, Ray 440 North Monroe Tallahassee, FL 32301 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WERNICKE, PATRICIA L 3695 NORTH L STREET PENSACOLA, FL 32505 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Garcia, Maria 6801 Hillsborough Avenue Tampa, FL 33680 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FISHER, ROBERT 6701 DALE MABRY HIGHWAY SOUTH TAMPA, FL 336115109 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHILDRESS, TERRY 1207 FENWICK DR LYNCHBURG, VA 24505 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Simkins, Paul 43 North Main Street Statesboro, GA 30458 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC MANSEL, GUERRY 1520 W CAPITOL ST. JACKSON, MS 39203 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with a power of attorney.					
SIGNATURE: <i>James H. Park</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date 2/14/05 <small>Daytime Phone #</small>		

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02142005 Chg-P CR2E034 (10/03)

Applied For
Not Applicable