2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 29, 2005 8:00 am Secretary of State

THE HOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees TILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees TILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees TILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees TILE NAME Added to Fees TILE NAME	DOCUMENT # P98000047015 1. Entity Name ROOSEVELT RECREATION & SOCIAL CLUB, INC.						04-29-2005 9	00210 003	***150	.00
Suito, Apt. #, circ. City & State Country Country Country Country Country S. Conflicate of Status Desired. Name State Address of New Registrand Agent. Name State Address of New Registrand Agent. Name City FL Zip Code State Address of New Registrand Agent. Name and Address of New Registrand Agent. Name and Address of New Registrand Agent. Name State Address of New Registrand Agent. Name and Address of New Registrand Agent. Name and Address of New Registrand Agent. Name State Address of New Registrand Agent. Name and Address of New Regist	230 "B" STR	EET	230 "B" STREET	230 "B" STREET					. SBIE! (1991 EN	709) II 19 2 1
City & State Country City & State S. Cerificate of Status Desired S. Tone and Address of New Registered Agent Name AMERILAWYER ASSA ALMERICA AVENUE Cory FL City City FL	2. Principal P	face of Business	3. Mailing Address	3. Mailing Address						
Space Spac	Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		04262005	Chg-P	CR2E03	4 (10/03)	
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AMERILAWYER 343 ALMERIA AVENUE CORAL GABLES, FL 33134 City FL Zip Code 8. The above named onthy submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE FILE NOWI!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added to Fees TITLE NOWI!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE WARRENGESS AMERICAN STREET STREET ADDRESS TITLE WALES, FL 33853 Dirty-S1-Zip TITLE WALES, FL 33853 Dirty-S1-Zip TITLE WALES, FL 33853 Dirty-S1-Zip TITLE HAWKINS, ALBERT JR Street ADDRESS CITY-S1-Zip LAKE WALES, FL 33853 Dirty-S1-Zip TITLE WARRENGESS MANUELL, TERRYE Dieles MANUELL, TERRYE STREET ADDRESS TITLE WARRENGESS TITL	Zip				try	5. Cerinicale of Status Desired Fe				
AMERILAWYER 343 ALMERIA AVENUE CORAL GABLES, FL 33134 City FL Zip Code		6. Name and Address of Current	d							
B. 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 Signature, ispect or protection of imposered agent and ties (application.) After May 1, 2005 Fee will be \$\$55.0.00 OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TILE VD MACK, JEROME MACK, JEROME MACK, JEROME MACK, JEROME MACK, JEROME MAKE SIREET ADDRESS OITY-ST-2P LAKE WALES, FL 33853 DITY-ST-2P DITY-ST-2P LAKE WALES, FL 33853 DITY-ST-2P DITY-ST-2P DITY-ST-2P DITY-ST-2P LAKE WALES, FL 33853 DITY-ST-2P DITY-ST-2P LAKE WALES, FL 33853 DITY-ST-2P Additional Control of the protection	343 ALMERIA AVENUE									
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SIGNATURE Signature. Speed or protect name of registered agent and take (a poscasion. (NOTE Registered Agent injustion in registrating). PILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees Added	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									
After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution.	SIGNATURE									
TITLE	FILE MONTH FEE 19 \$130.00									
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MANLEY, ALICE STREET ADDRESS CITY-ST-ZIP LAKE WALES, FL 33853 CITY-ST-ZIP TITLE VD Delots NAME HOWELL, TERRYE STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	NAME STREET ADDRESS	HORNE, CLINTON 507 E POLK AVE	☐ Delete	NAM STRE	e et address				☐ Change	Addition
NAME HOWELL, TERRYE NAME STREET ADDRESS 611 CARVER DRIVE STREET ADDRESS	name Street address	MANLEY, ALICE 510 CRESCENT CIRCLE	☐ Delicte	NAME STRE	E Et address			- 100	☐ Change	Addition
CITY-ST-ZIP LAKE WALES, FL 33853 CITY-ST-ZIP	NAME	HOWELL, TERRYE	☐ Delete	nam Stre	ET ADDRESS				☐ Change	☐ Addition
TITLE THAWKINS, DOROTHY NAME STREET ADDRESS CITY-ST-ZIP LAKE WALES, FL 33853 TILE NAME STREET ADDRESS CITY-ST-ZIP LAKE wales, FL 33853 CITY-ST-ZIP 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 each: that I am an officer or director.	NAME STREET ADDRESS CITY-ST-ZIP	HAWKINS, DOROTHY 325 OHIO ST. LAKE WALES, FL 33853		nami Stre City	ET ADDRESS -ST-ZIP	ection 119 07/3Viv	Florida Statutes I			Addition

indicated on this report of supplemental report is true and accurate and that my signature shall have the same legal effect as it 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 all other like empowered.

(863)679-8091 Dayune Phone #