


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2005 8:00 am
Secretary of State

02-02-2005 90031 014 ****70.00

DOCUMENT # N00038	
1. Entity Name OCALA CHAPTER 812, E.A.A., INC.	

Principal Place of Business 5303 SE 35 COURT OCALA, FL 34480 US	Mailing Address 5303 SE 35 COURT OCALA, FL 34480 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
Zip Country	Zip Country



01152005 Chg-NP CR2E037 (10/03)

4. FEI Number 59-3363746	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent FIELDHOUSE, WAYNE 5303 SE 35 COURT OCALA, FL 34472	7. Name and Address of New Registered Agent Name - FIELDHOUSE, WAYNE Street Address (P.O. Box Number is Not Acceptable) 8750 SE 70 TER City Ocala, FL FL Zip Code 34472
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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 Waven W. Felder DATE 1/15/05

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE D	SCHOELER, GEORGE 8930 SE 72 AVE OCALA, FL 34472	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE P	FIELDHOUSE, WAYNE 5303 SE 35 COURT OCALA, FL 34472	TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	P FIELDHOUSE, WAYNE 8750 SE 70 TER OCALA, FL 34472
TITLE S	EDBERG, SCOTT H 5303 SE 35 COURT OCALA, FL 34480	TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	S EDBERG, SCOTT H. 5303 SE 35 CT OCALA, FL 34480
TITLE S	WEAVER, FREDERICK G 8780 SE 70 TERRACE OCALA, FL 34472	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VP	FRANTE, DONNA 8 ASH TRAIL OCALA, FL 34472	TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	VP FRANTZ, DONNA 8 ASH TRAIL OCALA, FL 34472
TITLE D	MURPHY, SAM 2715 SE 48TH STREET OCALA, FL 34480	TITLE <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 617, 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.

SIGNATURE: Waven W. Felder DATE 1/15/05 Daytime Phone # 352-307-4448

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #