2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#724219

FILED Mar 20, 2007 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	SON AVE. PARK, FL 32789 U:	S		
urrent N	lailing Address:		New Mailing Addres	s:
	SON AVE. PARK, FL 32789 US	S		
El Number	: 59-1515952 FEI Nu	umber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	Address of Current	Registered Agent:	Name and Address of	of New Registered Agent:
82 JACK	, ANDREA L SON AVENUE			
AUNI LEK I	PARK, FL 32789 U	S		
he above	,		ourpose of changing its registere	d office or registered agent, or both,
he above the Stat	named entity submits e of Florida.		ourpose of changing its registere	d office or registered agent, or both
ne above the Stat	e named entity submits e of Florida. RE:			d office or registered agent, or both, Date
he above the Stat	e named entity submits e of Florida. RE:	this statement for the p	ent	
he above the Stat IGNATU FFICER ttle: ame: ddress:	e named entity submits e of Florida. RE: Electronic Signa	this statement for the particles ature of Registered Ag	ent	Date
he above the Stat IGNATU	e named entity submits e of Florida. RE: Electronic Signa S AND DIRECTORS: VD () Delete HOWARD, CAROLE 201 FAIRWAY DRIVE	this statement for the particle ature of Registered Ag	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO
ne above the Stat IGNATU FFICER tle: ame: Idress: ty-St-Zip: tle: ame: Idress:	e named entity submits e of Florida. RE: Electronic Signa S AND DIRECTORS: VD () Delete HOWARD, CAROLE 201 FAIRWAY DRIVE LONGWOOD, FL 32779 PD () Delete HANNON, EDWARD 100 FAIRWAY DRIVE	ature of Registered Ag	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: EDWARD HANNON PD 03/20/2007