

**2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Jul 13, 2005  
Secretary of State**

DOCUMENT# N04000011221

Entity Name: ABILITIES AT EAGLES NEST, INC.

**Current Principal Place of Business:**2735 WHITNEY RD  
CLEARWATER, FL 33760**New Principal Place of Business:****Current Mailing Address:**2735 WHITNEY RD  
CLEARWATER, FL 33760**New Mailing Address:**

FEI Number: 51-0530353

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**NEVILLE, MIKE  
2735 WHITNEY RD  
CLEARWATER, FL 33760 US**Name and Address of New Registered Agent:**THOMAS, GENE VP  
2735 WHITNEY RD  
CLEARWATER, FL 33760 US

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.

SIGNATURE: GENE THOMAS

07/13/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: DP ( ) Delete  
Name: SANDONATO, WILLIAM JR  
Address: 2735 WHITNEY RD  
City-St-Zip: CLEARWATER, FL 33760Title: DV ( ) Delete  
Name: KREISLE, LORI  
Address: 2735 WHITNEY RD  
City-St-Zip: CLEARWATER, FL 33760Title: DST ( ) Delete  
Name: NEVILLE, MIKE  
Address: 2735 WHITNEY RD  
City-St-Zip: CLEARWATER, FL 33760Title: D ( ) Delete  
Name: KLENKE, GUY  
Address: 2735 WHITNEY RD  
City-St-Zip: CLEARWATER, FL 33760**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: GUY KLENKE

D

07/13/2005

Electronic Signature of Signing Officer or Director

Date