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NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED Feb 22, 2005 8:00 am Secretary of State -

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Signature ### Signature Sig	ZIKED AT	LAN				Name						
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 fermiliar with, and accept the obligations of registered agent. Signature	13300 OPAL LANE					Street Address (P.O. Box Number is Not Acceptable)						
The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature												
The colligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and size if applicable. (NOTE: Registered Agent agrotture required when rendituring) DATE						City				FL	Zip Code	•
10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE P/D SIRER ALLAN STRET ADDRESS STRET ADD	SIGNATURE .		and tale if appli	9. Election Carr	npaign f	inancing		\$5.00 May Be		Make check		*************
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		certify that the information supplied with	this filing	does not qualify for	r the exe	emption state	d in Se	ction 119.07(3)(i), F	lorida Statute:	s. I further cer	tify that the in	nformation