## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35416

Entity Name: F.E.A.S.T., INC.

FILED Aug 22, 2005 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:
32764 US 1 PALM HAR	9N BOR, FL 34684 US	
Current Mailing Address:		New Mailing Address:
P.O. BOX 2 PALM HAR	154 BOR, FL 34682 US	
FEI Number: 59-2981961 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
Name and	Address of Current Registered Agent:	Name and Address of New Registered Agent:
ANDERSON, WALTER A 2380 WORLD PKWY BLVD #34 CLEARWATER, FL 33763 US		ANDERSON, WALTER A 2298 MALCOLM DR. PALM HARBOR, FL 34684 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:		08/22/2005
	Electronic Signature of Registered Agent	Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	PD () Delete VAN VOORST, FORREST 321 ARISTOLE ST DUNEDIN, FL 34698	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	VPD ( ) Delete WALTER, ANDERDON 2380 WORLD PKWY #34 CLEARWATER, FL 33763	Title: VPD (X) Change ( ) Addition Name: ANDERSON, WALTER A Address: 2298 MALCOLM DR. City-St-Zip: PALM HARBOR, FL 34684 US
Title: Name: Address: City-St-Zip:	D () Delete VAN VOORST, HAROLD 1763 MAIN STREET APT 103A DUNEDIN, FL 34689	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D ( ) Delete STANEK, DOROTHY 4158 CHESTERFIELD CIRCLE PALM HARBOR, FL 34683	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	DVP (X) Delete KRATZ, JAMES 8148 BRUNSWICK CIRCLE PALM HARBOR, FL 34684	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	SEC () Delete ADAMSKI, JOSEPHINE 608 BETMORE LANE OZONA, FL 34660	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: WALTER A. ANDERSON DVP 08/22/2005