2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N95000005742

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FILED Feb 20, 2007 8:00 am Secretary of State

02-20-2007 90045 044 ****61.25

C/O LARRY E. CIESLA, P.A. 204 W UNIVERSITY AVE SUITE 4 GAINESVILLE, FL 32601		P O BOX 357904 GAINESVILLE, FL 32635-7904 US			,					TIBLE (11)	
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.			021120	02112007 Chg-NP CR2E037 (12/06)					
City & State		City & State				4. FEI Number Applied For 59-3354063 Not Applicable					
Zip	Country	Zip	Zip Cou		5. Certific	5. Certificate of Status Desired \$8.75 Additional Fee Required			ditional d		
	6. Name and Address of Current	Registered Agent			7. Name	and Add	iress of New Re	egistered /	Agent		
CIESLA, LARRY E				Name							
	IVERSITY AVE		Street Add		dress (P.O. Box Number is Not Acceptable)						
1	LLE, FL 32601								Zip Cod	ما	
				City				FL	.] 210 000	16	
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											
	Filing Fee is \$61.25 Due by May 1, 2007	1	Election Campaign Finance Trust Fund Contribution.		\$5.00 M	\$5.00 May Be Make check p Added to Fees Florida Departm				, •	
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10.	OFFICERS AND D		11.		ADDITIONS		ES TO OFFICER		RECTORS IN	√ 10	
TITLE	OFFICERS AND D	IRECTORS Delete	nru		ADDITIONS O	/CHANG					
TITLE NAME	OFFICERS AND D D FRAINE, LISA		TITLI NAM	Œ	ADDITIONS O YANSKEY,	CHANG	1LD		RECTORS IN	i 10	
TITLE	OFFICERS AND D D FRAINE, LISA 5021 NW 24TH DRIVE		TITU NAM STRE		ADDITIONS O	CHANG Domi	LLO N AU	RS AND DI	RECTORS IN	i 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND D D FRAINE, LISA		TITU NAM STRE	EET ADDRESS '-ST-ZIP	ADDITIONS O YANSKEY, AHAI HW GAINESV	CHANG Domi	LLO N AU	RS AND DI	RECTORS IN	i 10	
TITLE NAME STREET ADDRESS	OFFICERS AND D D FRAINE, LISA 5021 NW 24TH DRIVE GAINESVILLE, FL 32605	☐ Delete	NAM STRE CITY	LE EET ADDRESS '-ST-ZIP E	ADDITIONS O YANSKEY, AHAI N W GAINESY P	OON (Hat)	ico n Au , FL 321	RS AND DI	RECTORS IN	V 10 Addition	
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NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME	OFFICERS AND D D FRAINE, LISA 5021 NW 24TH DRIVE GAINESVILLE, FL 32605 D XIN, JIANNONG 5015 NW 24TH TERR GAINESVILLE, FL 32605	☐ Delete	TITU NAM STRE CITY TITU NAM STRE	LE EET ADDRESS '-ST-ZIP E	ADDITIONS O YANSKEY, AHAI NW GAINESY P Peters, J	CHANG DONG HOT! ILLE LEAN QAN	LLD AU , FL 32L ette A OR	AS AND DI	RECTORS IN Change	Addition	
TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE	OFFICERS AND D D FRAINE, LISA 5021 NW 24TH DRIVE GAINESVILLE, FL 32605 D XIN, JIANNONG 5015 NW 24TH TERR GAINESVILLE, FL 32605 D	☐ Delete	TITLI NAM STRE CITY TITLE NAM STRE CITY TITLI	EET ADDRESS '-ST-ZIP EET ADDRESS '-ST-ZIP EET ADDRESS '-ST-ZIP	ADDITIONS VANSKEY, AHAI NW GAINESV Peters, J SOIS NW GAINESVI SHINESVI	CHANG DOWN HATI ILLE RAN RAN LLE	ette h DR , FL 321	AS AND DI	RECTORS IN	V 10 Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

352.271 5673