2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N96000006415

FILED Feb 05, 2007 8:00 am Secretary of State 02-05-2007 90102 024 ****70.00

INTERNA		EDACS USER GR)							
4450 U.S. HIGHWAY 1 44			Mailing Address 4450 US HIGHWAY 1 VERO BEACH, FL 32				60011703					
2. Principal P	lace of Busine	ess - No P.O. Box #	3. Mailing Address	ailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.	Suite, Apt. #, etc.			Chg-NP	CR2E0	37 (12/06)			
City & State			City & State				4. FEI Number Applied For 65-0726506 Not Applicable					
Zip	Country		Zip	<u> </u>		5. Certificate of Status Desired \$8.75 Additional Fee Required						
	6. Name	and Address of Current	Registered Agent		Name	7. Name and	Address of New R	Registered	Agent			
STORK, ROBERT W 4450 U.S. HIGHWAY 1 VERO BEACH, FL 32967					Name Street Address (P.O. Box Number is Not Acceptable)							
					City			FL	Zip Cod	de		
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 Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE												
				O I E. Flogisticies		oo mon on anang,						
-	_	e is \$61.25 lay 1, 2007	9. Election C		inancing	\$5.00 May Be	,		k payable t			
10.	_	e is \$61.25	9. Election C Trust Fund	ampaign F	Financing lion.	\$5.00 May Be Added to Fees	,	rida Depa	rtment of S	tate		
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	DUE by M DT STORK, R 4450 US H	e is \$61.25 lay 1, 2007 OFFICERS AND DIE	9. Election C Trust Fund	Campaign F d Contributi 11.	E D R	\$5.00 May Be Added to Fees ADDITIONS/CHA yan, Ray 450 Fair	Floor WGES TO OFFICE MOND St	rida Depa ERS AND D	IRECTORS IN	tate		
TITLE NAME STREET ADDRESS	DUE by M DT STORK, R 4450 US I VERO BE DP LEVY, THE	P is \$61.25 Iay 1, 2007 OFFICERS AND DIF COBERT WM. HWY 1 ACH, FL 32967	9. Election C Trust Fund RECTORS	Campaign F d Contributi 11. TITLE NAMI STRE CITY TITLE NAMI	E D RY EET ADDRESS 2- ST-ZIP 1 E D DIE C	\$5.00 May Be Added to Fees ADDITIONS/CHA yan, Ray 450 Fair incoln,	MGES TO OFFICE mond St NE 6850	rida Depa ERS AND D	IRECTORS IN	tate N 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DUE by M DT STORK, R 4450 US I VERO BE DP LEVY, THE	P is \$61.25 lay 1, 2007 OFFICERS AND DIF COBERT WM. HWY 1 ACH, FL 32967 OMAS EDALE DR	9. Election C Trust Fund RECTORS	Campaign F d Contributi 11. TITLE NAMI STRE CITY TITLE NAMI STRE	E D RY SECTION DE RY SECTION DE RY SECTION DE COMMENT SECTION DE COMME	\$5.00 May Be Added to Fees ADDITIONS/CHAY yan, Ray 450 Fair incoln, arlund, 01 West	MGES TO OFFICE mond St NE 6850 Rick State St	rida D epa	TIMECTORS IN Change	N 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DUE by M DT STORK, R 4450 US H VERO BE DP LEVY, THI 701 ROSE NEW ORL D CHAVOOI 141 GROV	P is \$61.25 lay 1, 2007 OFFICERS AND DIE COBERT WM. HWY 1 ACH, FL 32967 OMAS EDALE DR EANS, LA R, RANDY VE ST	9. Election C Trust Fund RECTORS	Campaign F d Contributi 11. TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE	E D R: EET ADDRESS 20 EET ADDRESS 30	\$5.00 May Be Added to Fees ADDITIONS/CHAY an, Ray 450 Fair incoln, arlund, 01 West arshallt anling, 000 Wizz	mond St NE 6850 Rick State St own, IA Jerrald th Avenu	13.	PIRECTORS IN Change	N 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DUE by M DT STORK, R 4450 US I VERO BE DP LEVY, THI 701 ROSE NEW ORL D CHAVOOI 141 GROV WORCES DS LITSCHAL 515 11TH	OFFICERS AND DIE COBERT WM. HWY 1 ACH, FL 32967 OMAS EDALE DR EANS, LA R, RANDY	9. Election C Trust Fund RECTORS Delete	Campaign F d Contributi 11. Title NAM STRE CITY	E D RY EET ADDRESS 2ST-ZIP 1 EE D CE EET ADDRESS 2ST-ZIP 1 EE VE EET ADDRESS 1 (-ST-ZIP 1 EE VE EET ADDRESS 1 (-ST-ZIP D EE VE EET ADDRESS 9 EET ADDRESS 9 EET ADDRESS 9 EET ADDRESS 9	\$5.00 May Be Added to Fees ADDITIONS/CHAY an, Ray 450 Fair incoln, arlund, 01 West arshallton and and arshallton and and and and and and and and arshallton and and and and arshallton and and and and and and and and and an	mond St NE 6850 Rick State St own, IA Jerrald th Avenu O 80204 erner d St	13.	Change Change	**************************************		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DUE by M DT STORK, R 4450 US I VERO BE DP LEVY, THI 701 ROSE NEW ORL D CHAVOOI 141 GROV WORCES DS LITSCHAL 515 11TH BRADENT DV PASICZN	P is \$61.25 lay 1, 2007 OFFICERS AND DIE COBERT WM. HWY 1 ACH, FL 32967 OMAS EDALE DR EANS, LA R, RANDY VE ST TER, MA 01605 JER, STEVE I ST WEST TON, FL 342057727 YKETS, GARY POLICE DEPT	9. Election C Trust Fund RECTORS Delete	Campaign F d Contributi 11. 11. 11. 11. 11. 11. 11. 11	E D RY EET ADDRESS 24 -ST-ZIP 1 EE D CE EET ADDRESS 21 -ST-ZIP MG EET ADDRESS 10 EET ADDRESS 10 EET ADDRESS 94 (-ST-ZIP LE EET ADDRESS 94 (-ST-ZIP LE EET ADDRESS 15	\$5.00 May Be Added to Fees ADDITIONS/CHA yan, Ray 450 Fair incoln, arlund, 01 West arshallt on the column of the	mond St NE 6850 Rick State St own, IA Jerrald th Avenu 0 80204 erner d St BC V	TRS AND D	Timent of S IRECTORS IN Change Change Change	Addition		

12. Thereby 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 eath; 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 attachprent with an address, with all other like empowered.

Changed, or of all blocking it will all bodiess, with all street and				,	(フィュ)
SIGNATURE: To bet TO PRINTED NAME OF SIGNING OF PROSE OR D	Robert	Stork,	Treasurer	1-31-67	549-5355
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR D	IRECTOR		Date	Dayon	me Phone #