2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 25, 2005 8:00 am Secretary of State

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1. Entity Nan BALLENI	MENT # N98000005				ł				
100 BALLENISLES CIRCLE 1			Mailing Address 100 BALLENISLES CIRCLE PALM BEACH GARDENS, FL 33418		20046323				
9 Principal (Plana of Business	2 Mailing Address							
2. Principal Place of Business		3. Mailing Address					13314 1334 BHO	ELLE LEHEL TO	16E) 9 3 UARI
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04192005 C	hg-NP	CR2E037 (10/03)	
City & State		City & State			4. FEI Number 65-0866504		Applied For Not Applicabl		
Zip	Country	Zip	Country	,	5. Certificate of S	tatus Desired		.75 Add	itional
	6. Name and Address of Current	Registered Agent			7. Name and Add	dress of New Re			
701 U.S. I	OHN ESQ. /TRYCH & RYAN, P.A. HIGHWAY ONE #402 ALM BEACH, FL 33408	Nampe R Street Addre		troet Address	Peter S P.O. Box Number is S S 9 X	Sachs Not Acceptable Klein	Esqu	ure	2
NORTH	ALM BEACH, FL 33406			301 5	01	oad, Su	ite 41°	SO Zip Cod	e
8. The above	e named entity submits this statement to	r thenurnees of objects - to	registered =	boca	RATON I	the Clare - C		339	131
the obliga	itions of registered agent.	(1/h.l.)					-		
the obliga	little V.	and trie 8 applicable. (NOTE	<u> </u>	nd signature required	d when renstating)		DATE	, 	
_	Start .	9. Election Can Trust Fund C	E: Registered Age		\$5.00 May Be Added to Fees		DATE ako check pa da Departme		
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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 attachmeptiwith anyaddress, with all other like empowered.

GNATURE:

SCHATTERE AND TYPED OR PRINTED MAME OF STORMS OFFICER OR DIRECTOR

Date

Date

Date

Date

Date

Date

Date 561-237-681) Daysime Phone #