2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007832

Entity Name: SERVANT INTERNATIONAL, INC.

FILED Apr 26, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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P.O. BOX 470876 P.O. BOX 151326

CELEBRATION, FL 34747 ALTAMONTE SPRINGS, FL 32715

Current Mailing Address: New Mailing Address:

P.O. BOX 470876 P.O. BOX 151326

CELEBRATION, FL 34747 ALTAMONTE SPRINGS, FL 32715

FEI Number: 33-1064846 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FAIRO, PENNY 5300 BERRIDGE LANE FAIRO, PENNY PO BOX 151326

ORLANDO, FL 32812 US ALTAMONTE SPRINGS, FL 32715 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: PENNY FAIRO 04/26/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PD (X) Change () Addition

Name: KRANING, SABRINA Name: FAIRO, PENNY
Address: 107 BRILLIANT AVE #2 Address: PO BOX 151326

City-St-Zip: PITTSBURGH, PA 15215 City-St-Zip: ALTAMONTE SPRINGS, FL 32715

Title: VD () Delete Title: VD (X) Change () Addition

 Name:
 FAIRO, PENNY
 Name:
 KRANING, SABRINA

 Address:
 3300 BERRIDGE LANE
 Address:
 5114 RIVERFRONT DRIVE

 City-St-Zip:
 ORLANDO, FL 32812
 City-St-Zip:
 PITTSBURGH, PA 15238

Title: SD () Delete Title: () Change () Addition

Name: STAMEY, DIANE Name:
Address: 103 JOSHUA CT. Address:

Address: 103 JOSHUA CT. Address: City-St-Zip: AUBURNDALE, FL 33823 City-St-Zip:

Title: () Delete Title: DIR () Change (X) Addition

 Name:
 Name:
 HOLDER, RAY

 Address:
 Address:
 722 32ND ST

 City-St-Zip:
 City-St-Zip:
 ORLANDO, FL
 32805

Title: () Delete Title: DIR () Change (X) Addition

 Name:
 Name:
 HOLDER, LIBBY

 Address:
 Address:
 722 32ND ST

 City-St-Zip:
 City-St-Zip:
 ORLANDO, FL 32805

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: PENNY FAIRO PD 04/26/2005