2006 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT #722307



ORLANDO, FL 32802-375	53	ORLANDO, FL 32802-3753					
2. Principal Place of Busine	ss	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
7in	Country	Zin	Country				

FILED May 01, 2006 8:00 am Secretary of State 05-01-2006 90334 031 ****61.25

Name and Address of Current Registered Agent Size Address	1. Entity Nam THE DR.		IPS FOUNDATIO	N								
Sulio, Apt. # vitc. Sulio, Apt. # vitc. Sulio, Apt. # vitc. Sulio, Apt. # vitc. D1052006 Chg.NP CR2E037 (11/05) City & State City & State City & State City & State Sp-6135403 Rapplead For Not Applicable R	60 W ROBINSON STREET 60 W ROBINSON STREET P O BOX 3753 P O BOX 3753					181111111			<u> </u>			
City & State Ci	Principal Place of Business 3. Mailing Address											
Special Section Special Se	Suite, Apt. #, etc. Suite, Apt. #, etc.					01052006	Chg-NP	CR2E03	7 (11/05)			
S. Certificate of Status Desired Fee Required F	City & State		City	City & State				50 0405400				
HINSON, J.A. 60 W. ROBINSON STREET ORLANDO, FL 32801 City FL Zip Code City FL Zip	Zip	Country Zip		Cou	intry	5. Certificate of	of Status Desired					
SIGN AT LORS ON JA. 6. The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE City		6. Name	and Address of Curren	t Registere	d Agent			7. Name and A	Address of New Re	gistered A	gent	
Street Address (P.O. Box Number is Not Acceptable) City	LUMCON						Name					
B. 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 familier with, and accept nee obligations of registered agent. SIGNATURE	60 W RO	BINSON S					Street Addre	ess (P.O. Box Number	is Not Acceptable)		
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, typed or printed name of registered agent and tall a speciable. NOTE. Registered Agent synature required when einstating) DATE			· •				City			FI	Zìp Cod	e
Signature, hybrid or printed name of registered agent and tale if applicable. NOTE: Registered Agent synature required when renotating)				for the purp	ose of changing its	registere	ed office or reg	gistered agent, or both	, in the State of Flor		amiliar with,	and accept
Trust Fund Contribution. Added to Fees Florida Department of State	SIGNATURE .		or printed name of registered ager	nt and title if appl	icable. (NOTE	: Registered	d Agent signature re	equired when reinstating)		DATE		
TITLE												
NAME SIREET ADDRESS GÜY-ST-ZIP ORLANDO, FL TITLE ASTD BURNETT, H.L. GO W ROBINSON ST ORLANDO, FL TITLE ORLANDO, FL TITLE NAME SIREET ADDRESS CITY-ST-ZIP ORLANDO, FL TITLE NAME SIREET ADDRESS CITY-ST-ZIP ORLANDO, FL TITLE ORLANDO, FL TITLE NAME FUREY III, E F GO W ROBINSON ST CITY-ST-ZIP ORLANDO, FL TITLE NAME SIREET ADDRESS CITY-ST-ZIP ORLANDO, FL TITLE NAME SIREET ADDRESS CITY-ST-ZIP ORLANDO, FL TITLE NAME SIREET ADDRESS CITY-ST-ZIP ORLANDO, FL TITLE ORLANDO, FL TITLE D ORLANDO, FL TITLE NAME SIREET ADDRESS CITY-ST-ZIP ORLANDO, FL TITLE NAME SIREET ADDRESS GO W. ROBINSON STREET ORLANDO, FL TITLE NAME SIREET ADDRESS GO W. ROBINSON STREET ORLANDO, FL TITLE NAME SIREET ADDRESS GO W. ROBINSON STREET ORLANDO, FL TITLE NAME SIREET ADDRESS GO W. ROBINSON STREET ORLANDO, FL TITLE NAME ORLANDO, FL TITLE NAME SIREET ADDRESS GO W. ROBINSON STREET ORLANDO, FL TITLE ORLANDO, FL TITLE ORLANDO, FL TITLE NAME SIREET ADDRESS GO W. ROBINSON STREET ORLANDO, FL TITLE ORLANDO, FL TITLE ORLANDO, FL TITLE NAME SIREET ADDRESS GO W. ROBINSON STREET ORLANDO, FL TITLE ORLANDO, FL		_						\$5.00 May Be Added to Fees	, ,			
TITLE NAME BURNETT, H.L. STREET ADDRESS CITY-ST-ZIP TITLE D CRLANDO, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE D CRLANDO, FL	10,	_	lay 1, 2006	IRECTORS		ontributi		Added to Fees	Flori	da Depart	tment of S	tate
NAME STREET ADDRESS CITY-ST-ZIP ORLANDO, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP Director David Scott 60 W. Robinson St.	TITLE NAME STREET ADDRESS	PDC HINSON, 60 W ROE	J.A. BINSON ST	RECTORS	Trust Fund C	11. TITLE NAME STREE	E ET ADDRESS	Added to Fees	Flori	da Depart	RECTORS IN	tate
NAME STREET ADDRESS GO W ROBINSON ST CITY-ST-ZIP ORLANDO, FL ITILE D HUBBARD, L E GO W. ROBINSON STREET ORLANDO, FL STREET ADDRESS CITY-ST-ZIP ORLANDO, FL ITILE D Delete ITILE NAME STREET ADDRESS CITY-ST-ZIP ORLANDO, FL ITILE D ROSS, THOMAS T STREET ADDRESS CITY-ST-ZIP ORLANDO, FL ITILE D STREET ADDRESS CITY-ST-ZIP ORLANDO, FL ITILE ORLANDO, FL STREET ADDRESS STREET ADD	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PDC HINSON, 60 W ROE ORLANDO ASTD BURNETI 60 W ROE	J.A. BINSON ST D, FL I, H.L. BINSON ST	HECTORS	Trust Fund C	11. TITLE NAME STREE CETY- TITLE NAME STREE	E E ET ADDRESS -ST-ZIP E E ET ADDRESS	Added to Fees	Flori	da Depart	RECTORS IN	tate 1 10 Addition
NAME STREET ADDRESS CITY-ST-ZIP ORLANDO, FL TITLE NAME ROSS, THOMAS T STREET ADDRESS STREET ADDRESS CITY-ST-ZIP D Change Change Addition CITY-ST-ZIP D Change CHANGE STREET ADDRESS CITY-ST-ZIP CON ROSS, THOMAS T STREET ADDRESS CITY-ST-ZIP CON ROSS, TH	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PDC HINSON, 60 W ROE ORLANDO ASTD BURNETI 60 W ROE ORLANDO D FLETCHE 60 W. RO	J.A. BINSON ST D, FL F, H.L. BINSON ST D, FL FR, RICHARD L JR. BINSON ST.	HRECTORS	Trust Fund C	11. TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE NAME STREE NAME STREE	E E ET ADDRESS ST-ZIP E E E E ET ADDRESS ST-ZIP E E E E E E E E E E E E E E E E E E E	Added to Fees ADDITIONS/CHA Secretary Ann F. Man 50 W. Robi	Flori NGES TO OFFICER	da Depart	tment of S RECTORS IN Change Change	tate t 10 Addition Addition
NAME ROSS, THOMAS T SIREET ADDRESS 60 W. ROBINSON STREET CITY ST. 78 OPLANDO EL CITY ST. 7	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	PDC HINSON, 60 W ROE ORLANDO ASTD BURNETT 60 W ROE ORLANDO TLETCHE 60 W. RO ORLANDO VTD FUREY III 60 W ROE	J.A. J.A. BINSON ST D, FL J. H.L. BINSON ST D, FL J. H.L. BINSON ST D, FL J. FL	HRECTORS	□ Delete □ Delete □ Delete	11. TITLE NAME STREE CITY TITLE NAME STREE CITY TITLE NAME STRE CITY TITLE NAME STRE CITY TITLE NAME STRE CITY	E E E ET ADDRESS -ST-ZIP E E E ET ADDRESS -ST-ZIP E E E ET ADDRESS -ST-ZIP E E E E E ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E	Added to Fees ADDITIONS/CHA Secretary Ann F. Man 50 W. Robi	Flori NGES TO OFFICER	da Depart	tment of S RECTORS IN Change Change	tate t 10 Addition Addition Addition
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of the corporation or source remainer of the same and accurate and mainty signature snall nave the same legal effect as it made under oath; that I am an officer or director of the corporation or the receiver of 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 attacking of with a haddress, with all other like empowered.

SIGNATURE

Ed F. Furey III, &V. President GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

407-422-6105