2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2005
Secretary of State

DOCUMENT# 715228

Entity Name: FLORIDA BOYS RANCH FOUNDATION, INC.

Current Principal Place of Business:

6010 STATE ROAD 33
CLERMONT, FL 347362514 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 635
GROVELAND, FL 347360635 US

New Mailing Address:

FEI Number: 59-8212420 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

VARVEL,DOYLE
6010 SR-33
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DS ( ) Delete
Name: WINSHIP, BEVERLY,
Address: 3530 GREATBEAR CT.
City-St-Zip: ORLANDO, FL 32810

Title: DST ( ) Delete
Name: SKYLES, PATSY
Address: 11140 HASKELL DR
City-St-Zip: CLERMONT, FL 34711

Title: VD ( ) Delete
Name: VARVEL, DOYLE,
Address: 6010 SR-33
City-St-Zip: CLERMONT, FL 32711,

Title: DST ( ) Delete
Name: SKYLES, SANDRA,
Address: 5579 DENISE AVE
City-St-Zip: ORLANDO, FL 32810

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: DOYLE VARVEL P. 05/06/2005

Electronic Signature of Signing Officer or Director — Date