FILED Jan 18, 2007 8:00 am Secretary of State 01-18-2007 90106 048 ****61.25

2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT** DOCUMENT # 738533

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| 315 GLENVIEW BLVD #1 3 | | | 315 | ailing Address 15 GLENVIEW BLVD #1 AYTONA BEACH, FL 32118-3818 | | | | 60002627 | | | | |
| Principal Place of Business - No P.O. Box # 3. Mailir | | | | ling Address | | | | | | | | |
| Suite, Apt. #, etc. | | | Su | Suite, Apt. #, etc. | | | | 01102007 C | hg-NP | CR2E0 | 37 (12/06) | |
| City & State | | | City & State | | | | | 4. FEI Number 59-176780 | 07 | | | pplied For ot Applicable |
| Zip | Zip Country | | | | | untry . Tel | | 6. Certificate of S | | | \$8.75 Ad Fee Require | |
| | 6. Name | and Address of Current | Registere | d Agent | | ļ., | | 7. Name and Add | dress of New R | legistered | Agent | |
| MALONE, MARY M | | | | | | Name Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| 315 GLENVĮĘW BLVD. #1 DAYTONA BEACH, FL 32118 | | | | | JII GET AC | Juless (i | .o. box (vallice) is | | | | | |
| DATTON | , DE TOTT, | 12 02/10 | | City | | | | | <u></u> | FL | Zip Cod | le |
| | named entit | ty submits this statement fo | or the purp | ose of changing its | register | ed office or | register | ed agent, or both, in | the State of Flo | | | and accept |
| | | | | | | | | | | | | |
| SIGNATURE . | Slonature, typeo | d or printed name of registered agent | and tille it non | | 5. B | | | when reinstating) | | DATE | | |
| | | | 0110 1110 11 000 | icadia. (NO) | E. Hetistere | a Ageni signatu | ire required | when remaining) | _ | DATE | | |
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12. I hereby 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 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 attachment with an address, with all other like empowered.

Mat 4 M Malore
SIGNATURE AND TIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR