

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748580

FILED
Apr 27, 2005
Secretary of State

Entity Name: SYMPOSIA FOUNDATION, INC.

Current Principal Place of Business:

4407 MANCHESTER AVE
STE 208
ENCINITAS, CA 92024

New Principal Place of Business:

Current Mailing Address:

4407 MANCHESTER AVE
STE 208
ENCINITAS, CA 92024

New Mailing Address:

FEI Number: 59-1938111 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PILOTTE, FRANK T
MURPHY, REID, PILOTTE, ORD & AUSTIN
340 ROYAL PALM WAY, STE-100
PALM BEACH, FL 33480 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: PD () Delete
Name: ZIMPELMAN, HILBERT M.
Address: 120 VIA CANTEBRIA, #A5
City-St-Zip: ENCINITAS, CA

Title: DCEO () Delete
Name: ZIMPELMAN, HILBERT M
Address: 120 VIA CANTEBRIA, #A5
City-St-Zip: ENCINITAS, CA 92024

Title: SD () Delete
Name: TWICHEL, CAROLYN A
Address: 5500 MORRO WAY #68
City-St-Zip: LA MESA, CA 91942

Title: VD () Delete
Name: GUYMON, MICHAEL M
Address: 439 POCOHONTAS AVE
City-St-Zip: SAN DIEGO, CA 92117

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: HILBERT M. ZIMPELMAN

CEO

04/27/2005

Electronic Signature of Signing Officer or Director

_____ Date