2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2005
Secretary of State

DOCUMENT# 760992

Entity Name: THE FORREST C. LATTNER FOUNDATION, INC.

Current Principal Place of Business:

777 E. ATLANTIC AVE., SUITE 317
DELRAY BCH., FL 33483

New Principal Place of Business:

Current Mailing Address:

777 E. ATLANTIC AVE., SUITE 317
DELRAY BCH., FL 33483

New Mailing Address:

FEI Number: 59-2147657 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HARRIS, JACK
NORTHERN TRUST BANK
770 E ATLANTIC AVENUE
DELRAY BEACH, FL 33483 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:	DP	( ) Delete
Name:	LLOYD, SUSAN L.	
Address:	274 WOODCOCK LN	
City-St-Zip:	AMBLER, PA 19002	
Title:	DCS	( ) Delete
Name:	WALKER, MARTHA L	
Address:	227 E PINE MEADOW CT	
City-St-Zip:	ANDOVER, KS 67002	
Title:	DT	( ) Delete
Name:	BROWN, FORREST C.,	
Address:	7777 FOREST LANE STE 528	
City-St-Zip:	DALLAS, TX 75230	
Title:	T	( ) Delete
Name:	HARRIS, RICHARD M	
Address:	3622 DUMBARTON RD, NW	
City-St-Zip:	ATLANTA, GA 30327	
Title:	T	( ) Delete
Name:	HOLLENBECK, DAVID W	
Address:	428 GREEN GLEN WAY	
City-St-Zip:	MILL VALLEY, CA 94941	
Title:	T	( ) Delete
Name:	HOLLENBECK, DOUGLAS W	
Address:	8 SHEPHERDS RUN	
City-St-Zip:	WATCH HILL, RI 02891	

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:	
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: MARTHA L. WALKER MRS 02/24/2005
Electronic Signature of Signing Officer or Director — Date