

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000001460

Entity Name: ORA INTERNATIONAL, INC.

FILED
Apr 07, 2005
Secretary of State

Current Principal Place of Business:

5524 COWFORD RD
EBRO, FL 32437

New Principal Place of Business:

Current Mailing Address:

PO BOX 37
EBRO, FL 324370037

New Mailing Address:

FEI Number: 54-1513803

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOWNING, DAVID J
5524 COWFORD RD
EBRO, FL 32437 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: FLORECK, HEINRICH
Address: STUMPFWEG 16
City-St-Zip: 3546 VOHL 1 GERMANY,

Title: CSD () Delete
Name: DOWNING, DAVID J
Address: 5524 COWFORD RD
City-St-Zip: EBRO, FL 32437

Title: D (X) Delete
Name: WOODWARD, WOODY
Address: 1439 W SLEEPY HOLLOW
City-St-Zip: OLATHE, KS 66062

Title: D () Delete
Name: RUMLEY, ELAINE
Address: PO BOX 630016
City-St-Zip: LANAI CITY, HI 96763

Title: VD () Delete
Name: GROSSHAUSER, TONI
Address: LINDENSTR. 16
City-St-Zip: AUMEHLE, GY D-2151

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:

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: DAVID J. DOWNING

CSD

04/07/2005

Electronic Signature of Signing Officer or Director

Date