2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002175

Entity Name: ACTION PARK ALLIANCE, INC

FILED Jan 13, 2005 Secretary of State

Littly Na	me. ACTION	FARN ALLIANCE, INC.			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
15131 CLARK AVENUE CITY OF INDUSTRY, CA 91745			15131 CLARK AVENUE	15131 CLARK AVENUE	
			B CITY OF INDUSTRY, C	B CITY OF INDUSTRY, CA 91745	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	ARK AVENUE NDUSTRY, CA	91745			
FEI Number	: 47-0857891	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
KRAAS, KEVIN 400 FESTIVAL WAY ORLANDO, FL 32803 US			JESTIN, DAVIS 400 FESTIVAL WAY ORLANDO, FL 32803	US	
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATURE: JESTIN DAVIS				01/13/2005	
	Electror	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PC (SPOHN, AARO 6501 W. 84TH LOS ANGELES	ST.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VVC (SPOHN, DAMO 6130 W. 76TH LOS ANGELES	ST.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S (BRADFORD, K 6130 W. 76TH LOS ANGELES	ST.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T (BRADFORD, K 6130 W. 76TH LOS ANGELES	ST.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	D ()) Delete ARK	Title:	() Change () Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: KIRSTEN BRADFORD CFO 01/13/2005

8319 GONZAGA AVE.

City-St-Zip: LOS ANGELES, CA 90045

Address: