

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006074

FILED
May 03, 2007
Secretary of State

Entity Name: FUNDACION APADRINE UN ARBOL (FUNDARBOL) INC.

Current Principal Place of Business:

PENTHOUSE EDIFICIO VALLE
BULEVAR MORAZÁN Y CALZADA MARTINICA
TEGUCIGALPA, FM 504

New Principal Place of Business:

Current Mailing Address:

C/O GUILLERMO E. VALLE M
COL. SAN CARLOS NO. 2901, FRENTE EUROAUTOS
TEGUCIGALPA, FM 504

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KIVETT, GERALD J
4711 CURRY FORD ROAD
ORLANDO, FL 32812 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: P () Delete
Name: VALLE, GUILLERMO E. M
Address: COL. SAN CARLOS NO. 2901, FRENTE EUROAUTOS
City-St-Zip: TEGUCIGALPA, FM 504 HO

Title: V () Delete
Name: FIALLOS, ZONIA MATILDE F
Address: EDIFICIO VALLE, PENTHOUSE BLVD. MORAZÁN
City-St-Zip: TEGUCIGALPA, FM 504 HO

Title: T () Delete
Name: NOLASCO, JOSE G.
Address: EDIFICIO QUIJOTE ARTE Y DISEÑO, AVE. LA PAZ
City-St-Zip: TEGUCIGALPA, FM 504 HO

Title: S () Delete
Name: LOPEZ, EDITH MARIA R
Address: COL. FLORENCIA SUR, 2DA. CALLE NO. 4068
City-St-Zip: TEGUCIGALPA, FM 504 HO

Title: D () Delete
Name: VALLE, GUILLERMO M
Address: EDIFICIO VALLE, PENTHOUSE BLVD. MORAZÁN
City-St-Zip: TEGUCIGALPA, FM 504 HO

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 exemption stated 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 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: GUILLERMO E. VALLE M.

P

05/03/2007

Electronic Signature of Signing Officer or Director

Date