

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001485

FILED  
Mar 28, 2006  
Secretary of State

Entity Name: HUMANITY RESOURCE, INC.

## Current Principal Place of Business:

3633 SW 14 ST.  
FT. LAUDERDALE, FL 33312

## New Principal Place of Business:

## Current Mailing Address:

3633 SW 14 ST.  
FT. LAUDERDALE, FL 33312

## New Mailing Address:

FEI Number: 31-1713175

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NALLS, JOHN W JR.  
3633 S.W. 14TH ST.  
FT. LAUDERDALE, FL 33312 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: NALLS, JOHN W JR.  
Address: 3633 SW 14TH ST.  
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: S ( ) Delete  
Name: NALLS, LOUBERTHA  
Address: 3633 SW 14TH ST.  
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: TD ( ) Delete  
Name: NALLS, JOHN W 3  
Address: 3704 SW 13TH CT.  
City-St-Zip: FT. LAUDERDALE, FL 33312

## 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:

I hereby certify that the information supplied with this filing does not qualify for the 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: LOUBERTHA NALLS

OFFI

03/28/2006

Electronic Signature of Signing Officer or Director

Date