2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 14, 2005
Secretary of State

DOCUMENT# N00000008270

Entity Name: THE ACORN FOUNDATION

Current Principal Place of Business:

1 W. JULIAND HILL RD
#C
GREENE, NY 13778

New Principal Place of Business:

Current Mailing Address:

3280 C S ATLANTIC AVE #57
DAYTONA BCH SHORES, FL 32118

New Mailing Address:

P.O. BOX 333
PORT CRANE, NY 13833

FEI Number: 31-1762325 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **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:

BROOK-HARTE, JAN
5429 EAGLE CLAW DR
PORT ORANGE, FL 32128 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:	BROOKE-HARTE, JAN	
Address:	5429 EAGLE CLAW DR	
City-St-Zip:	PORT ORANGE, FL 32128	
Title:	D	( ) Delete
Name:	SANDERS, F. BROOKS	
Address:	175 KNAPP HILL RD	
City-St-Zip:	CASTLE CREEK, NY 13744	
Title:	D	( ) Delete
Name:	HULTING, BRENDA	
Address:	1102 CHUKKER LANE	
City-St-Zip:	CROWNSVILLE, MD 210321926	
Title:	D	(X) Delete
Name:	STEFFENSEN, ERNEST	
Address:	382 MAIN ST	
City-St-Zip:	JOHNSON CITY, NY 13790	

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:	

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: JAN BROOKE-HARTE PRES 06/14/2005

Electronic Signature of Signing Officer or Director — Date