2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000631

Entity Name: THE PRINCIPE FOUNDATION, INC.

FILED Feb 19, 2005 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

318 S. PALMETTO AVE, #6 1307 A PARK AVENUE SANFORD, FL 32771 US SANFORD, FL 32771 US

Current Mailing Address: New Mailing Address:

318 S. PALMETTO AVE, #6 1307 A PARK AVENUE SANFORD, FL 32771 US SANFORD, FL 32771 US

FEI Number: 59-3739341 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PRINCIPE, CASPER LOUIS
318 S. PALMETTO AVE, #6
SANFORD, FL 32771 US
PRINCIPE, CASPER LOUIS
1307 A PARK AVENUE
SANFORD, FL 32771 US

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: CASPER PRINCIPE 02/19/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

D () Delete Title: D (X) Change () Addition
PRINCIPE, CASPER LOUIS Name: PRINCIPE, CASPER LOUIS

 Name:
 PRINCIPE, CASPER LOUIS
 Name:
 PRINCIPE, CASPER LOUIS

 Address:
 318 S. PALMETTO AVE, #6
 Address:
 1307 A PARK AVENUE

 City-St-Zip:
 SANFORD, FL 32771
 City-St-Zip:
 SANFORD, FL 32771

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 HOKE, DON
 Name:
 HOKE, DON

Address: 318 S. PALMETTO AVE, #6 Address: 1307 A PARK AVENUE

City-St-Zip: SANFORD, FL 32771 City-St-Zip: SANFORD, FL 32771

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

Name:HENRY, REXName:HENRY, REXAddress:318 S. PALMETTO AVE, #6Address:1307 A PARK AVENUE

Address: 318 S. PALMETTO AVE, #6 Address: 1307 A PARK AVENUE City-St-Zip: SANFORD, FL 32771 City-St-Zip: SANFORD, FL 32771

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: CASPER PRINCIPE D 02/19/2005