2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# N01000000647

Entity Name: EARTH BOUND, INC.

Current Principal Place of Business:

828 NW 21ST AVE
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

828 NW 21ST AVE
GAINESVILLE, FL 32609

New Mailing Address:

FEI Number: 59-3439444 **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:

WILKINS, LAURIE
828 NW 21ST AVE
GAINESVILLE, FL 32609 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: D ( ) Delete
Name: WILKINS, LAURIE
Address: 828 NW 21ST AVE
City-St-Zip: GAINESVILLE, FL 32609

Title: D ( ) Delete
Name: NIMS, BRENDA
Address: 821 URSULINES ST
City-St-Zip: NEW ORLEANS, LA 70116

Title: DC ( ) Delete
Name: SMITH, PHIL
Address: 21 ELLICOTT AVENUE
City-St-Zip: BATAVIA, NY 14020

Title: DHC ( ) Delete
Name: LEWY, ROBIN G
Address: 1119 NW 26TH TERR.
City-St-Zip: GAINESVILLE, FL 32605

Title: D (X) Delete
Name: TOWNSEND, WENDY
Address: 828 NW 21 AVE.
City-St-Zip: GAINESVILLE, FL 32609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: NIMS, BRENDA
Address: 5829 LOVERS LANE
City-St-Zip: SHREVEPORT, LA 70117

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DHC (X) Change ( ) Addition
Name: TOWNSEND, WENDY
Address: 828 NW 21ST AVE
City-St-Zip: GAINESVILLE, FL 32609

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: LAURIE WILKINS DIR 05/01/2006

Electronic Signature of Signing Officer or Director — Date