

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004530

FILED  
May 01, 2005  
Secretary of State

**Entity Name:** THE TERRA NOVA FOUNDATION, INC.

**Current Principal Place of Business:**

3240 SW 34TH STREET  
SUITE 1103  
OCALA, FL 33474

**New Principal Place of Business:**

**Current Mailing Address:**

3240 SW 34TH STREET  
SUITE 1103  
OCALA, FL 33474

**New Mailing Address:**

**FEI Number:** 65-1114916      **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:**

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

DAVIS, ROBERT E  
3240 SW 34TH STREET  
SUITE 1103  
OCALA, FL 33474 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: DAVIS, ROBERT E  
Address: 3240 SW 34TH STREET, STE. 1103  
City-St-Zip: OCALA, FL 33474

Title: D ( ) Delete  
Name: MENTZER, BARBARA A  
Address: 305 ROLEY ST  
City-St-Zip: BELLE VERNON, PA 15012

Title: D ( ) Delete  
Name: MENTZER, BRIAN  
Address: 305 ROLEY ST  
City-St-Zip: BELLE VERNON, PA 15012

Title: D ( ) Delete  
Name: DAVIS, ELEANOR A  
Address: 3240 SW 34TH STREET, STE. 1103  
City-St-Zip: OCALA, FL 33474

**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: ROBERT E. DAVIS

D

05/01/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date