2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2005
Secretary of State

DOCUMENT# N01000007365

Entity Name: BIRTH NETWORK OF FLORIDA, INC.

Current Principal Place of Business:

P.O. BOX 641114
BEVERLY HILLS, FL 34464

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 641114
BEVERLY HILLS, FL 34464

New Mailing Address:

FEI Number: 65-1158357 **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:

SCHWARTZ, BETSY K
2528 N. BRENTWOOD CIRCLE
LECANTO, FL 34461 US

Name and Address of New Registered Agent:

SCHWARTZ, BETSY K
2568 W. MESA VERDE DRIVE
BEVERLY HILLS, FL 34465 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: _____ 07/07/2005
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: SCHWARTZ, BETSY K
Address: 2528 BRENTWOOD CIRCLE
City-St-Zip: LECANTO, FL 34461

Title: VSD ( ) Delete
Name: HENRY, MARGARET
Address: 225 S DAVIS
City-St-Zip: BEVERLY HILLS, FL 34465

Title: D ( ) Delete
Name: BATOG, DANIELLE
Address: 3074 N. DELEON AVE.
City-St-Zip: BEVERLY HILLS, FL 34465

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition
Name: SCHWARTZ, BETSY K
Address: 2568 W. MESA VERDE DRIVE
City-St-Zip: BEVERLY HILLS, FL 34465

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: BETSY K. SCHWARTZ PTD 07/07/2005
Electronic Signature of Signing Officer or Director — Date