2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # N01000007428

1. Entity Name DONALD'S HONOR, INC.



Principal Place of Business

1727 N.E. 40TH STREET OAKLAND PARK, FL 33334

Mailing Address

1727 N.E. 40TH STREET OAKLAND PARK, FL 33334

FILED Apr 29, 2005 8:00 am Secretary of State

04-29-2005 90257 031 ****61.25

14009670



04182005 No Chg-NP

CR2E037 (10/03)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DAVIS, DONALD 1727 N.E. 40TH STREET OAKLAND PARK, FL 33334

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	named entity submits this statement for the ions of registered agent.	purpose of changing its registere	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	a if applicable. (NOTE: Registered	i Agent signature	e required when reinstating)	DATE
	Filing Fee is \$61.25 Due by May 1, 2005	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD DAVIS, DONALD 1727 NE 40TH STREET OAKLAND PARK, FL 33334		DO NOT WRITE IN THIS SPACE		
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13. Legeby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information					

12. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/29/05 (954) 772-4460 (Sherry