2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006
Secretary of State

DOCUMENT# N02000001576

Entity Name: STOLEN CHILD 911 TELEVISION NETWORK, INC.

Current Principal Place of Business:

1510 W ARIANA ST #225
LAKELAND, FL 33803

New Principal Place of Business:

Current Mailing Address:

PO BOX 8894
LAKELAND, FL 33806

New Mailing Address:

FEI Number: 59-3688109 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BROWN, DONNA C
1510 W ARIANA ST #225
LAKELAND, FL 33803 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: DIAZ, DANIEL E
Address: 525 GLOVER AVE.
City-St-Zip: ENTERPRISE, AL 36330

Title: S ( ) Delete
Name: BROWN, DONNA C
Address: 1510 W ARIANA ST #225
City-St-Zip: LAKELAND, FL 33803

Title: P ( ) Delete
Name: ELLIS, KENNETH D
Address: PO BOX 3
City-St-Zip: SALINE, LA 71070

Title: VP ( ) Delete
Name: YOUNG, TUESDAY
Address: PO BOX 1014
City-St-Zip: SWANNANOA, NC 28778

Title: T (X) Delete
Name: BROWN, NAOMI
Address: 147 JACKSON PARK AVE.
City-St-Zip: DAVENPORT, FL 33897

Title: D (X) Delete
Name: BROWN, DONALD
Address: 147 JACKSON PARK AVE.
City-St-Zip: DAVENPORT, FL 33897

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: DIAZ, DANIEL E
Address: 100 ROSE
City-St-Zip: ENTERPRISE, AL 36330

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

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

Title: T (X) Change ( ) Addition
Name: LANE, JAMES B
Address: 4800 RUCKER BLVD
City-St-Zip: ENTERPRISE, AL 36330

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 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: DONNA C BROWN S 04/10/2006

Electronic Signature of Signing Officer or Director — Date