## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000001604

Entity Name: THE ACTS FOUNDATION, INC.

FILED Apr 26, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 6500 WINEGARD ROAD SUITE 110 ORLANDO, FL 32809 **New Mailing Address: Current Mailing Address:** 6500 WINEGARD ROAD SUITE 110 ORLANDO, FL 32809 FEI Number: 75-3035978 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GARCIA, JESSE 6500 WINEGARD ROAD SUITE 110 ORLANDO, FL 32809 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: D/P () Delete () Change () Addition GARCIA, JESSE Name: Name: 2930 HARBOUR GRACE COURT Address: Address: City-St-Zip: APOPKA, FL 32703 City-St-Zip: Title: D/ST () Delete Title: () Change () Addition GARCIA, MARTHA Name: Name: Address: 2930 HARBOUR GRACE COURT Address: City-St-Zip: APOPKA, FL 32703 City-St-Zip: Title: () Delete Title: () Change () Addition TORRES, DAVID Name: Name: 1214 KEATS AVENUE Address: Address: City-St-Zip: ORLANDO, FL 32703 City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: BETTS, RICHARD Name: Address: 589 LITTLE RIVER LOOP, #181 Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: Title: () Delete Title: () Change () Addition RIVERA, WILFREDO Name: Name: 1721 WATAUGA AVE., #204 Address: Address: City-St-Zip: ORLANDO, FL 32812 City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition COOK, STEVE Name: Name: Address: Address: 2211 EMORY PLACE ORLANDO, FL 32806 City-St-Zip: 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: JESSE GARCIA D/P 04/26/2005