2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002448

Entity Name: EACHONETEACHONE FOUNDATION, INC.

FILED May 08, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5745 SW 75 ST #119 2603 NW 13TH STREET #339 GAINESVILLE, FL 32608 GAINESVILLE, FL 32609

Current Mailing Address: New Mailing Address:

5745 SW 75 ST #119 2603 NW 13TH STREET #339 GAINESVILLE, FL 32608 GAINESVILLE, FL 32609

FEI Number: 02-0686530 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:

MERRIMAN, VANDA W
5745 SW 75 ST #119
GAINESVILLE, FL 32608
US

MERRIMAN, VANDA W
2603 NW 13TH STREET #339
GAINESVILLE, FL 32609
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: 05/08/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 BYRD, WILLIAM
 Name:
 BYRD, WILLIAM

 Address:
 1415-2A SW 42 ST
 Address:
 2603 NW 13TH STREET #339

City-St-Zip: GAINESVILLE, FL 32607 City-St-Zip: GAINESVILLE, FL 32609

Title: SD () Delete Title: SD (X) Change () Addition Name: BAILEY, DWIGHT SD (X) Change () Addition Name: BAILEY, DWIGHT

 Address:
 1415-2A SW 42 ST
 Address:
 2603 NW 13TH STREET #339

 City-St-Zip:
 GAINESVILLE, FL 32607
 City-St-Zip:
 GAINESVILLE, FL 32609

Title: TD () Delete Title: TD (X) Change () Addition

 Name:
 MERRIMAN, VANDA
 Name:
 MERRIMAN, VANDA

 Address:
 5745 SW 75TH ST. #119
 Address:
 2603 NW 13TH STREET #339

 City-St-Zip:
 GAINESVILLE, FL 32608
 City-St-Zip:
 GAINESVILLE, FL 32609

I hereby certify that the information supplied with this filing does not qualify 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: VANDA MERRIMAN TD 05/08/2008