2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006780

FILED Mar 07, 2005 Secretary of State

Entity Name: THE RON AND DIANNE FARB CLIMB FOR CANCER FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 10000 SW 52ND AVENUE 3424 SW 92ND STREET GAINESVILLE, FL 32608 141 GAINESVILLE, FL 32608 **New Mailing Address: Current Mailing Address:** 5745 SW 75TH ST GAINESVILLE, FL 32608 FEI Number: 11-3655183 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FARB, B. DIANNE FARB, B. DIANNE 10000 SW 52ND AVE 3424 SW 92ND STREET GAINESVILLE, FL 32608 US GAINESVILLE, FL 32608 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: B. DIANNE FARB 03/07/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition FARB, B. DIANNE FARB, B. DIANNE Name: Name: 10000 SW 52ND AVE, #141 Address: 3424 SW 92ND STREET Address: City-St-Zip: GAINESVILLE, FL 32608 City-St-Zip: GAINESVILLE, FL 32608 Title: () Delete Title: (X) Change () Addition FARB, RONALD G Name: FARB, RONALD G Name: Address: 10000 SW 52ND AVE. #141 Address: 3424 SW 92ND STREET City-St-Zip: GAINESVILLE, FL 32608 City-St-Zip: GAINESVILLE, FL 32608 Title: () Delete Title: () Change () Addition TARNUZZER, NINA Name: Name: 11203 SW 16TH ST Address: Address: City-St-Zip: MICANOPY, FL 32667 City-St-Zip: Title: () Delete Title: () Change () Addition Name: RODGERS, SUSAN Name: 144 LAUREL LANE Address: Address: City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: Title: () Delete Title: () Change () Addition BRIGHT, FRED Name: Name: 3512 KYLEMORE COURT Address: Address: City-St-Zip: CHARLOTTE, NC 28210 City-St-Zip: Title: () Delete Title: () Change () Addition MORTON, DAVE Name: Name: Address: 3430 44TH AVE SW Address:

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.

City-St-Zip:

SIGNATURE: B. DIANNE FARB VP 03/07/2005

SEATTLE, WA 98116

City-St-Zip: