2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007151

FILED Feb 10, 2005 Secretary of State

Entity Name: GIFT OF TOMORROW FOUNDATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 1540 THE GREENS WAY JACKSONVILLE BEACH, FL 32250 **Current Mailing Address: New Mailing Address:** 1540 THE GREENS WAY JACKSONVILLE BEACH, FL 32250 FEI Number: 30-0127252 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: HAY, JONATHAN L 1548 LANCASTER TERRACE JACKSONVILLE, FL 32204 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: () Change () Addition () Delete SCHEIDEL, HERBERT W Name: Name: 821 PONTE VEDRA BEACH Address: Address: City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: Title: () Delete Title: () Change () Addition SCHEIDEL, ROLF H Name: Name: Address: 4338 VICKBURG Address: City-St-Zip: SYLVANIA, OH 43560 City-St-Zip: Title: () Delete Title: (X) Change () Addition CLEAVE, JON V WHITE, GERALD Name: Name: 367 PAPALOA ROAD 8805 BELLECHASE Address: Address: City-St-Zip: KAPAA KAUAI, HA 96746 OC City-St-Zip: GRANBURY, TX 67049 Title: () Delete Title: (X) Change () Addition THOMPSON, THERESA Name: WHITE, GERALD Name: Address: 8805 BELLECHASE Address: 707 KEEP STREET City-St-Zip: GRANBURY, TX 67049 City-St-Zip: DARLINGTON, WI 53530

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: HERBERT W. SCHEIDEL PRES 02/10/2005