2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2007
Secretary of State

DOCUMENT# N02000007207

Entity Name: FOUNDATION FOR WESTSIDE TECH, INC.

Current Principal Place of Business:

955 EAST STORY ROAD
WINTER GARDEN, FL 347873798 US

New Principal Place of Business:

Current Mailing Address:

955 EAST STORY ROAD
WINTER GARDEN, FL 347873798 US

New Mailing Address:

FEI Number: 30-0095524 **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:

BRANN, ADELINA M MRS.
955 EAST STORY ROAD
WINTER GARDEN, FL 34787 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: SCROGGINS, ROGER MR.
Address: 224 9TH AVENUE
City-St-Zip: WINDERMERE, FL 34786

Title: D ( ) Delete
Name: JENKINS, ANDREW MR.
Address: 955 EAST STORY ROAD
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: SD ( ) Delete
Name: NEWMAN, JODY MRS
Address: 955 EAST STORY ROAD
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: D ( ) Delete
Name: BAKER, JERRY MR
Address: 955 EAST STORY ROAD
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: D ( ) Delete
Name: SWICKERATH, MARY A MRS
Address: 720 S DILLARD AVENUE
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: D ( ) Delete
Name: WEIDENHAMER, SHELLY MRS
Address: 251 WEST PLANT STREET
City-St-Zip: WINTER GARDEN, FL 34787 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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: ADELINA BRANN MRS 05/04/2007
Electronic Signature of Signing Officer or Director — Date