2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005
Secretary of State

DOCUMENT# N02000009728

Entity Name: CHILDREN'S NUTRITION OF FLORIDA, INC.

Current Principal Place of Business:

12412 SAN JOSE BLVD SUITE 304
JACKSONVILLE, FL 32223 US

New Principal Place of Business:

Current Mailing Address:

12412 SAN JOSE BLVD SUITE 304
JACKSONVILLE, FL 32223 US

New Mailing Address:

FEI Number: 30-0135726 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TYBECK, NATALIE K
152 DRAGONFLY DRIVE
JACKSONVILLE, FL 32259 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: TYBECK, NATALIE
Address: 152 DRAGONFLY DRIVE
City-St-Zip: JACKSONVILLE, FL 32259

Title: D ( ) Delete
Name: WISHNECK, HOLLY
Address: 562 HANCOCK ST.
City-St-Zip: ORANGE PARK, FL 32073

Title: D ( ) Delete
Name: CHIVVIS, SHERRIE
Address: 118 NAUGATUCK DR.
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: WISHNECK, HOLLIE
Address: 562 HANCOCK ST.
City-St-Zip: ORANGE PARK, FL 32073

Title: D (X) Change ( ) Addition
Name: CHIVVIS, SHERIE
Address: 118 NAUGATUCK DR.
City-St-Zip: JACKSONVILLE, FL 32225

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: NATALIE K. TYBECK D 04/26/2005

Electronic Signature of Signing Officer or Director — Date