## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000003858

FILED Mar 21, 2005 Secretary of State

Entity Name: WORLD WIDE UFO NETWORK, INC.

Current Principal Place of Business:			New Principal Place of Business:	
P.O.BOX (ISSIMME	451032 EE, FL 34745			
Current Mailing Address:			New Mailing Address:	
P.O.BOX (ISSIMME	451032 EE, FL 34745			
El Numbe	r: 90-0096211	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
lame and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
104 LEE	ELL, DONALD LAN DR O, FL 32809	US		
		submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both
	e of Florida. RE:	·		
the Stat	e of Florida. RE:	submits this statement for the particles in the particles of Registered Agric Signature Office Signatur		ed office or registered agent, or both  Date
n the Stat	e of Florida. RE:	ic Signature of Registered Ag	ent	
the Stat	e of Florida.  RE: Electron S AND DIREC	ic Signature of Registered Ago TORS:  Delete	ent	Date
the State of the S	Electron  S AND DIREC  PVST () COVERDELL, F 2454 SABLE DE KISSIMMMEE,	ic Signature of Registered Agr TORS:  Delete R FL 34744  Delete	ent  ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO
the Stat IGNATU PFFICER ttle: ame: ddress: ity-St-Zip: ttle: ame: ddress:	Electron  S AND DIREC  PVST () COVERDELL, F 2454 SABLE DF KISSIMMMEE, I  COVERDELL, F 2454 SABLE DF KISSIMMMEE, I	ic Signature of Registered Agr TORS:  Delete R FL 34744  Delete FL 34744  Delete Delete	ent  ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date  ES TO OFFICERS AND DIRECTO  ( ) Change ( ) Addition

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: P COVERDELL PVST 03/21/2005