2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004448

Entity Name: PAUL E. HOSTETLER FOUNDATION, INC.

FILED Apr 24, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3439 TECHNOLOGY DR. STE 4 105 TRIPLE DIAMOND BLVD NOKOMIS, FL 34275

SUITE 101

NORTH VENICE, FL 34275

Current Mailing Address: New Mailing Address:

PO BOX 1967 NOKOMIS, FL 34274

FEI Number: 55-0864541 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:

MILONAS, TASO M WAGNER, E. JOHN 1800 SECOND ST, STE 884 200 S ORÂNGE AVE SARASOTA, FL 34236 SARASOTA, FL 34236 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: E. JOHN WAGNER 04/24/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

HOSTETLER, PAUL E HOSTETLER, PAUL E Name: Name:

3439 TECHNOLOGY DR, STE 4 Address: 105 TRIPLE DIAMOND BLVD, #101 Address: City-St-Zip: NOKOMIS, FL 34275 City-St-Zip: NORTH VENICE, FL 34275

Title: () Delete Title: (X) Change () Addition Name: BEACH, JAMES G JR Name: BANKS, JERRY

Address: 3439 TECHNOLOGY DR. STE 4 Address: 105 TRIPLE DIAMOND BLVD. #104

City-St-Zip: NOKOMIS, FL 34275 City-St-Zip: NORTH VENICE, FL 34275

Title: () Delete Title: (X) Change () Addition WILEY, COLLEEN E Name: WILEY, COLLEEN E Name:

3439 TECHNOLOGY DR, STE 4 105 TRIPLE DIAMOND BLVD, #101 Address: Address:

City-St-Zip: NOKOMIS, FL 34275 City-St-Zip: NORTH VENICE, FL 34275

I hereby certify that the information supplied with this filing does not qualify for the 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: PAUL E HOSTETLER D 04/24/2006