


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 18, 2005 08:00 AM
Secretary of State

DOCUMENT # N03000007181
 1. Entity Name
REDLAND RENAISSANCE FAIRE, INC.



Principal Place of Business Mailing Address
6971 SW 64TH ST. **6971 SW 64TH ST.**
MIAMI, FL 33143 **MIAMI, FL 33143**

DO NOT WRITE IN THIS SPACE



07132005 No Chg-NP CR2E037 (10/03)

4. FEI Number Applied For
54-2122511 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HANAFOURDE, BRADLEY K
STREET ADDRESS	6971 SW 64TH ST.
CITY-ST-ZIP	MIAMI, FL 33143
TITLE	D
NAME	HANAFOURDE, SARAH
STREET ADDRESS	6971 SW 64TH ST.
CITY-ST-ZIP	MIAMI, FL 33143
TITLE	D
NAME	GOULD, LAUREN
STREET ADDRESS	6971 SW 64TH ST.
CITY-ST-ZIP	MIAMI, FL 33143
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 07/18/05-80004-022 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other IFRS empowered.

SIGNATURE: BRADLEY K HANAFOURDE 7/15/05 305 661 0425
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #