2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008026

FILED May 01, 2005 Secretary of State

Entity Name: STAND UP AND BE COUNTED, INC. **Current Principal Place of Business: New Principal Place of Business:** 900 COVE CAY DRIVE #7A LARGO, FL 33770 **Current Mailing Address: New Mailing Address:** P.O. BOX 5813 CLEARWATER, FL 33760 FEI Number: 05-0589754 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: Name and Address of New Registered Agent: COYLE, DANIELE E COYLE, DANIELE E 900 COVE CAY DRIVE#7A 703 EAST BAY DR #119 SUNPOINT PLACE LARGO, FL 33770 LARGO, FL 33770 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: 05/01/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **DPTS** () Change () Addition () Delete COYLE, DANIEL E Name: Name: Address: 703 EAST BAY DR #119 Address: City-St-Zip: LARGO, FL 33770 City-St-Zip: Title: DVS () Delete Title: () Change () Addition Name: COYLE, MARIANNE C Name: Address: 900 COVE CAY DR #7A Address: City-St-Zip: CLEARWATER, FL 33764 City-St-Zip: Title: () Delete Title: (X) Change () Addition HANNON, MICHAEL Name: HANNON, MICHAEL Name: 7038 EAST BAY DR., #219 6262 142AVE N. APT 301 Address: Address: City-St-Zip: LARGO, FL 33770 City-St-Zip: CLAERWATER, FL 33760

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: DANIEL E COYLE DPTS 05/01/2005