2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2004
Secretary of State

DOCUMENT# N03000008110

Entity Name: NEW HORIZONS FOUNDATION (U.S.A.), INC.

Current Principal Place of Business:

301 N. CATTLEMEN ROAD
SUITE 205
SARASOTA, FL 34232

New Principal Place of Business:

301 N. CATTLEMEN RD
SUITE 205
SARASOTA, FL 34232 US

Current Mailing Address:

301 N. CATTLEMEN ROAD
SUITE 205
SARASOTA, FL 34232

New Mailing Address:

301 N. CATTLEMEN ROAD
SUITE 205
SARASOTA, FL 34232 US

FEI Number: 56-2398044 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHIPPER, JAMES R
301 N. CATTLEMEN ROAD
SUITE 205
SARASOTA, FL 34232

Name and Address of New Registered Agent:

SCHIPPER, JAMES R
301 N. CATTLEMEN RD
SUITE 205
SARASOTA, FL 34232 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: _____ 04/23/2004
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SCHIPPER, JAMES R
Address: 301 N. CATTLEMEN ROAD, SUITE 205
City-St-Zip: SARASOTA, FL 34232

Title: VD ( ) Delete
Name: KELLY, JEAN M
Address: 301 N. CATTLEMEN ROAD, SUITE 205
City-St-Zip: SARASOTA, FL 34232

Title: SD ( ) Delete
Name: BISHER, BEVERLY L
Address: 301 N. CATTLEMEN ROAD, SUITE 205
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SCHIPPER, JAMES R
Address: 301 N. CATTLEMEN RD STE 205
City-St-Zip: SARASOTA, FL 34232 US

Title: VD (X) Change ( ) Addition
Name: KELLY, JEAN M
Address: 301 N. CATTLEMEN RD STE 205
City-St-Zip: SARASOTA, FL 34232

Title: SD (X) Change ( ) Addition
Name: BISHER, BEVERLY L
Address: 301 N. CATTLEMEN RD, STE 205
City-St-Zip: SARASOTA, FL 34232

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: JAMES R SCHIPPER P 04/23/2004
Electronic Signature of Signing Officer or Director — Date