2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008234

Entity Name: THE DANIEL FOUNDATION NETWORK ASSOCIATION, INC.

FILED Aug 17, 2004 Secretary of State

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

1494 FARRINDON CIRCLE 237 FERNWOOD BOULEVARD HEATHROW, FL 32746 SUITE "ONE HUNDRED SEVEN"

FERN PARK, FL 32730

Current Mailing Address: New Mailing Address:

1494 FARRINDON CIRCLE237 FERNWOOD BOULEVARDHEATHROW, FL 32746SUITE "ONE HUNDRED SEVEN"

FERN PARK, FL 32730

FEI Number: 47-0930522 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:

PAYNE, BRUCE
237 FERNWOOD
3110 COLUMBUS CIRCLE
SUITE # 111
LONGWOOD, FL 32750 US
ERN PARK,, FL 32730 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: RICK E. MCENTIRE, MA 08/17/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIO

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 P (X) Change () Addition

 Name:
 MCENTIRE, RICK E
 Name:
 MCENTIRE, RICK E MA

 Address:
 1494 FARRINDON CIRCLE
 Address:
 110 COLUMBUS CIRCLE

City-St-Zip: HEATHROW, FL 32746 US City-St-Zip: LONGWOOD, FL 32750 US

Title: () Delete Title: (X) Change () Addition Name: BYRAM, DAWN Name: BYRAM, DAWN L PHD Address: 1494 FARRINDON CIRCLE Address: 110 COLUMBUS CIRCLE City-St-Zip: HEATHROW, FL 32746 City-St-Zip: LONGWOOD, FL 32750

Title: S/T () Delete Title: S/T (X) Change () Addition

 Name:
 PAYNE, BRUCE
 Name:
 MCENTIRE, BRAD L

 Address:
 1494 FARRINDON CIRCLE
 Address:
 110 COLUMBUS CIRCLE

 City-St-Zip:
 HEATHROW, FL 32746
 City-St-Zip:
 LONGWOOD, FL 32750

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: RICK E. MCENTIRE P 08/17/2004