2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001642

City-St-Zip:

ORLANDO, FL 32804

Entity Name: DRAKESMITH FAMILY FOUNDATION, INC.

FILED Mar 23, 2005 Secretary of State

The state of the s						
Current Pi	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
	N YOUNG PKV), FL 32804	VY				
Current Mailing Address:			New Maili	New Mailing Address:		
	N YOUNG PKV), FL 32804	VY				
FEI Number: 20-0824690 FEI Number Applied For() FE		FEI Number Not Appl	icable ()	Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of					ew Registered Agent:	
1000 LEGIO STE 1700	WILLIAM R JI ON PLACE), FL 32801 U					
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:						
	Electror	ic Signature of Registered Agen	t	Date		
OFFICERS	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () DRAKESMITH, 2424 JOHN YO ORLANDO, FL	UNG PKWY	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () DRAKESMITH, 2424 JOHN YO ORLANDO, FL	UNG PKWY	Title: Name: Address: City-St-Zip:	DT (X) DRAKESMITH, 3 2424 JOHN YOU ORLANDO, FL	UNG PKWY	
Title: Name: Address: City-St-Zip:	D () DRAKESMITH I 2424 JOHN YO ORLANDO, FL	UNG PKWY	Title: Name: Address: City-St-Zip:	DS (X) DRAKESMITH N 2424 JOHN YOU ORLANDO, FL	UNG PKWY	
Title: Name: Address: City-St-Zip:	D () DRAKESMITH, 2424 JOHN YO ORLANDO, FL	UNG PKWY	Title: Name: Address: City-St-Zip:	DV (X) DRAKESMITH, I 2424 JOHN YOU ORLANDO, FL	UNG PKWY	
Title: Name: Address:	D () DRAKESMITH, 2424 JOHN YO		Title: Name: Address:	DP (X) DRAKESMITH, 2424 JOHN YOU		

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.

City-St-Zip:

ORLANDO, FL 32804

SIGNATURE: JOHN DRAKESMITH D 03/23/2005