2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2006
Secretary of State

DOCUMENT# N04000002585

Entity Name: VISITING NURSE ASSOCIATION AIRSHOW, INC.

Current Principal Place of Business:

2400 S.E. MONTEREY ROAD
SUIRE 300
STUART, FL 34996

New Principal Place of Business:

2400 S.E. MONTEREY ROAD
SUITE 300
STUART, FL 34996

Current Mailing Address:

2400 S.E. MONTEREY ROAD
SUIRE 300
STUART, FL ;34996

New Mailing Address:

2400 S.E. MONTEREY ROAD
SUITE 300
STUART, FL 34996

FEI Number: 90-0155314 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CROW, DONALD R
2400 S.E. MONTEREY ROAD
SUIRE 300
STUART, FL 34996 US

Name and Address of New Registered Agent:

CROW, DONALD R
2400 S.E. MONTEREY ROAD
SUITE 300
STUART, FL 34996 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: _____ 01/27/2006
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: CROW, DONALD R
Address: 2400 SE MONTEREY ROAD, SUITE 300
City-St-Zip: STUART, FL 34996

Title: TSD ( ) Delete
Name: ROBERTS, TERESA
Address: 2400 SE MONTEREY ROAD, SUITE 300
City-St-Zip: STUART, FL 34996

Title: VD ( ) Delete
Name: MCGLYNN, WALTER
Address: 2400 SE MONTEREY ROAD, SUITE 300
City-St-Zip: STUART, FL 34996

Title: D ( ) Delete
Name: MALONE, BERNIE
Address: 2400 SE MONTEREY ROAD, SUITE 300
City-St-Zip: STUART, FL 34996

Title: D ( ) Delete
Name: MOON, MICHAEL
Address: 2400 SE MONTEREY ROAD, SUITE 300
City-St-Zip: STUART, FL 34996

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DONALD R. CROW PD 01/27/2006
Electronic Signature of Signing Officer or Director — Date