2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED May 04, 2007 8:00 am Secretary of State

05-04-2007 90090 043 ****61.25

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DOCUMENT # N04000002789
1. Entity Name
THE FOUNDATION FOR A BETTER PLACE, INC.

Principal Ptace of Business 14101 RACE TRACK RD TAMPA, FL 33626-1306 Mailing Address
14101 RACE TRACK RD
TAMPA EL 33626.1304

TAMPA, FL :	33626-1306	TAMPA, FL 33626-1306		• .			
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2. Principal F	Plage of Business - No P.O. Box # 3	Mailing Address		 			
14905	PINEAPPLE LANG 1		PLE LAN	JE	Chill ginti nætili Enlit onlit Hu	1311 B-2119 1184 1882 18318 11	IIIIZI BI IĐEI
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		04252007	Chg-NP (CR2E037 (12/06)	
City & Stat		City & State		4. FEI Numbe		 	oplied For
IAMPA	····	IAMPA , 1		20-128	3591	l N	ot Applicable
336	24 Country A	33624	Country		of Status Desired	S8.75 Ad Fee Require	
	6. Name and Address of Current Reg	jistered Agent		7. Name and	Address of New Reg	Istered Agent	
KREISCH	ER, JR., ALBERT C		Name				
	TES & KREISCHER		Street Add	dress (P.Ö. Box Numbe	er is Not Acceptable)		
	ÚSCH BLVD		<u> </u>		_ 		
TAMPA, Ę	L 33612					 .	
	-		City			FL Zip Coo	le
8. The above	named entity submits this statement for the	e purpose of changing its regi	stered office or re	registered agent, or bot	h, in the State of Florid	a. I am familiar with,	and accept
the obligat	ions of registered agent.						
SIGNATURE	Signature, typed or printed name of registered agent and to	the description (NOTE De-	etered Appet supply	e required when reinstating)		DATE	
	, Signature, typeo or printed name or registered agent and it	ine il applicable. (NOTE neg	istered Agent signature	e tedinen when temprated)		DATE	
	Filing Fee is \$61.25	9. Election Campaig		\$5.00 мау в		e check payable t	
7	Due by May 1, 2007	Trust Fund Contr	ibution.	Added to Fees	Florida	Department of S	tate
10.	OFFICERS AND DIREC	TORS	11.	ADDITIONS/CH	ANGES TO OFFICERS	AND DIRECTORS IN	V 10
TITLE	D	☐ Delete	TITLE			☐ Change	Addition
NAME	BISHOP, WILLIAM L		NAME				
STREET ADDRESS CITY-ST-ZIP	1,4101 RACE TRACK RD TAMPA, FL 336261306		STREET ADDRESS CITY-ST-ZIP				
TITLE	D		 -			>≠ Change	Addition
				1			
NAME	ł ⁻	☐ Delete	NAME (D LENTON, Ar	NE-MARIE		
NAME STREET ADDRESS	LENTON, ANNE-MARIE 14101 RACE TRACK RD	☐ Delete	NAME C	D LENTON, Ar 14905 Pin	NE-MARIE EAPPLE LA	Ne Bronzinge	
	LENTON, ANNE-MARIE	∐ Delete	NAME (STREET ADDRESS	D LENTON, AN 14905 PIN TAMPA, FL		NET BY CHANGE	
STREET ADDRESS	LENTON, ANNE-MARIE 14101 RACE TRACK RD	□ Delete Delete	NAME CARRET ADDRESS CATY-ST-ZIP	LENTON, AND 14905 PIN		~ Change	⊠ , Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	LENTON, ANNE-MARIE 14101 RACE TRACK RD TAMPA, FL 336261306 D MCDONALD, CHARLES M		NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	LENTON, AND 14905 PIN TAMPA, FL	33676 18	~ Change	- ,-
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	LENTON, ANNE-MARIE 14101 RACE TRACK RD TAMPA, FL 336261306 D MCDONALD, CHARLES M 14101 RACE TRACK RD		NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	LENTON, AM 14905 PIN TAMPA FL D LUDWIG DA 5403 LIPS	33626 COMB STRE	~ Change	- ,-
STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP	LENTON, ANNE-MARIE 14101 RACE TRACK RD TAMPA, FL 336261306 D MCDONALD, CHARLES M 14101 RACE TRACK RD TAMPA, FL 336261306	≫ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	LENTON, AMILY OF PIN TAMIPA, FL D LUDINIG, DAN 5403 LIPS TAMPA, FL	33626 COMB STRE	~ c Change	⊠ , Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	LENTON, ANNE-MARIE 14101 RACE TRACK RD TAMPA, FL 336261306 D MCDONALD, CHARLES M 14101 RACE TRACK RD TAMPA, FL 336261306 D		NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE	LENTON, AMILY OF PIN TAMPA, FL D LUDIUIG DAN 5403 LIPS TAMPA, FL	33626 Comb STRE 33611	~ Change	- ,-
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	LENTON, ANNE-MARIE 14101 RACE TRACK RD TAMPA, FL 336261306 D MCDONALD, CHARLES M 14101 RACE TRACK RD TAMPA, FL 336261306 D RINEHART, JOHN F	Delete	NAME STREET ADDRESS CHTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME E	LENTON, AMILY OF PIN TAMIPA, FL D LUDINIG, DAN 5403 LIPS TAMPA, FL	33626 Comb STR	~ c Change	⊠ , Addition
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TREET ADDRESS CITY-ST-ZIP TITLE NAME	LENTON, ANNE-MARIE 14101 RACE TRACK RD TAMPA, FL 336261306 D MCDONALD, CHARLES M 14101 RACE TRACK RD TAMPA, FL 336261306 D RINEHART, JOHN F C/O GLATTING JACKSON, 33 E PIN ORLANDO, FL 32801 D KREISCHER, JR., ALBERT C	Delete Delete De	NAME STREET ADDRESS CHTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CHTY-ST-ZIP TITLE NAME TITLE NAME TITLE NAME TITLE NAME NAME	LENTON, AMILY OF PIN TAMPA, FL D LUDIUIG DAN 5403 LIPS TAMPA, FL	33626 Comb STR	☐ Change ☐ Change	∭, Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	LENTON, ANNE-MARIE 14101 RACE TRACK RD TAMPA, FL 336261306 D MCDONALD, CHARLES M 14101 RACE TRACK RD TAMPA, FL 336261306 D RINEHART, JOHN F C/O GLATTING JACKSON, 33 E PIN ORLANDO, FL 32801 D KREISCHER, JR., ALBERT C C/O FUENTES & KREISCHER, 1401	Delete Delete De	NAME STREET ADDRESS CITY-ST-ZIP TITLE	LENTON, AM 14905 PIN 14905 PIN TAMPA, FL 5403 LIPS TAMPA, FL DEGNER, DIAN	33626 Comb STR	☐ Change ☐ Change	∭, Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	LENTON, ANNE-MARIE 14101 RACE TRACK RD TAMPA, FL 336261306 D MCDONALD, CHARLES M 14101 RACE TRACK RD TAMPA, FL 336261306 D RINEHART, JOHN F C/O GLATTING JACKSON, 33 E PIN ORLANDO, FL 32801 D KREISCHER, JR., ALBERT C C/O FUENTES & KREISCHER, 1401	Delete Delete Delete WE ST Delete WE BUSCH BLVD	NAME STREET ADDRESS CHTY-ST-ZIP TITLE NAME	LENTON, AMILY OF PIN 14905 PIN TAMPA, FL LUDWIG, DAN 5403 LIPS TAMPA, FL D EGNER, DIAN	33626 SIRE 33611	Change	
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12. Thereby certify that the information supplied with this fitting does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: .	SIGNATURE AND TYPED OR PRINTED NAM	DIRECTOR FOR SIGNING OFFICER OR DIRECTOR	511(A)	SJ3 -12(6-7900
	 	WILLIAM LASSIC	" -1 l.	612 621 -0-1