2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400003080

FILED Apr 30, 2005 Secretary of State

Entity Name: HORN OF PLENTY ENRICHMENT FOUNDATION, INC.

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

120 INTERNATIONAL PARKWAY 160 INTERNATIONAL PARKWAY

SUITE 220 SUITE 150

HEATHROW, FL 32746 HEATHROW, FL 32746

Current Mailing Address: New Mailing Address:

120 INTERNATIONAL PARKWAY 160 INTERNATIONAL PARKWAY

SUITE 220 SUITE 150

HEATHROW, FL 32746 HEATHROW, FL 32746

FEI Number: 20-1089273 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:

BUFORD, CARL WRIGHT, EVE ATTY 120 INTERNATIONAL PARKWAY 160 INTERNATIONAL PARKWAY

SUITE 220 SUITE 150 HEATHROW, FL 32746 US HEATHROW, FL 32746 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: EVE WRIGHT 04/30/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

BUFORD, CARL BUFORD, CARL Name: Name:

1690 BRIDGEWATER DRIVE Address: 160 INTERNATIONAL PARKWAY - STE 150 Address:

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

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

BUFORD, CAROL A Name: BUFORD, CAROL A Name: Address: 1690 BRIDGEWATER DRIVE Address:

160 INTERNATIONAL PARKWAY - STE 150 HEATHROW, FL 32746

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

Title: () Delete Title: (X) Change () Addition BUFORD, CARRIELLE BUFORD, CARRIELLE Name: Name:

1690 BRIDGEWATER DRIVE 160 INTERNATIONAL PARKWAY - STE 150 Address: Address:

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

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

Name: Name: BUFORD, CARRALYCE A

160 INTERNATIONAL PARKWAY - STE 150 Address: Address:

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

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: CAROL A.J. BUFORD **VP** 04/30/2005