## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000004168

FILED Aug 31, 2005 Secretary of State

Entity Name: THE FERN DRIVE ORGANIZATION, INC.			
Current Prin	ncipal Place of Business:	New Principal Place o	f Business:
#437,1304 S\ SUNRISE, FL	W 160TH AVE L 33326	1304 SW 160TH AVE #437 SUNRISE, FL 33326	
Current Mail	ling Address:	New Mailing Address:	:
#437,1304 S\ SUNRISE, FL	W 160TH AVE L 33326	1304 SW 160TH AVE #437 SUNRISE, FL 33326	
FEI Number: 84-1648211 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
	ddress of Current Registered Agent:	•	New Registered Agent:
DEBS, LUIS 354 FERN DI WESTON, FL		DEBS, LUIS 354 FERN DRIVE WESTON, FL 33326	US
The above na in the State of	amed entity submits this statement for the purpose of Florida.	of changing its registered	office or registered agent, or both,
SIGNATURE	:		08/31/2005
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Name: E Address: #	DC () Delete DEBS-MALLAR, LUIS #437,1304 SW 160TH AVE SUNRISE, FL 33326	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition
Name: C Address: #	D () Delete CANTERBURY, YESMIN #437,1304 SW 160TH AVE SUNRISE, FL 33326	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition
Name: E Address: #	D () Delete DEBS, DANIEL #437,1304 SW 160TH AVE SUNRISE, FL 33326	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: LUIS DEBS-MALLAR 08/31/2005 DC

( ) Delete

Title:

Name:

Address:

City-St-Zip:

( ) Change (X) Addition

ACKBAR-MORAIS, CISLYN

#437, 1304 SW 160TH AVE SUNRISE, FL 33326