2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 19, 2005
Secretary of State

DOCUMENT# N04000004307

Entity Name: ZULU AFRICAN HIV-AIDS EDUCATION FUNDATION, INC.

Current Principal Place of Business:

8750 PERIMETER PARK BLVD
JACKSONVILLE, FL 322166347

New Principal Place of Business:

Current Mailing Address:

8750 PERIMETER PARK BLVD
JACKSONVILLE, FL 322166347

New Mailing Address:

FEI Number: 76-0755823 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GRABAU, CALVIN
8750 PERIMETER PARK BLVD
JACKSONVILLE, FL 322166347 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: T ( ) Delete
Name: GRABAU, CALVIN
Address: 2361 CORTEZ RD
City-St-Zip: JACKSONVILLE, FL 32246

Title: T ( ) Delete
Name: HENDERSON, ROGER
Address: 7816 1293 BRIGHTON RIDGE CT
City-St-Zip: JACKSONVILLE, FL 32218

Title: T ( ) Delete
Name: SIMONIC, NICHOLAS T
Address: 8750 PERIMETER PARK BLVD
City-St-Zip: JACKSONVILLE, FL 322166347

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GRABAU, CALVIN
Address: 2361 CORTEZ RD
City-St-Zip: JACKSONVILLE, FL 32246

Title: V (X) Change ( ) Addition
Name: HENDERSON, ROGER
Address: 1293 BRIGHTON RIDGE CT
City-St-Zip: JACKSONVILLE, FL 32218

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 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: ROGER HENDERSON V 05/19/2005
Electronic Signature of Signing Officer or Director Date