2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2005
Secretary of State

DOCUMENT# N04000004572

Entity Name: HEAVENLY BLESSED CARE FOUNDATION, INC.

Current Principal Place of Business:

1549 LEE RD
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

1549 LEE RD
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 41-2138531 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JEAN, JONASSAINT
1549 LEE RD
WINTER PARK, FL 32789 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: P ( ) Delete
Name: NORGAISSE, KARLY
Address: 1549 LEE RD
City-St-Zip: WINTER PARK, FL 32789

Title: V ( ) Delete
Name: JONASSAINT, JEAN
Address: 1671 JORDAN TERR
City-St-Zip: DELTONA, FL 32725

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP ( ) Change (X) Addition
Name: LAGUERRE, MIDERLIO
Address: 2811 HALEY DR
City-St-Zip: ORLANDO, FL 32808

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: KARLY NORGAISSE P 04/30/2005

Electronic Signature of Signing Officer or Director — Date