2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2005
Secretary of State

DOCUMENT# N04000005267

Entity Name: GOOD NEIGHBOR PROGRAM INC.

Current Principal Place of Business:

16042 HORIZON CT.
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

16042 HORIZON CT.
CLERMONT, FL 34711

New Mailing Address:

FEI Number: 55-0887415 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GARVIS, JOHN W
16042 HORIZON CT.
CLERMONT, FL 34711 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:	F	( ) Delete
Name:	GARVIS, DIANNE S	
Address:	16042 HORIZON CT	
City-St-Zip:	CLERMONT, FL 34711	
Title:	P	( ) Delete
Name:	GARVIS, JOHN W	
Address:	16042 HORIZON CT.	
City-St-Zip:	CLERMONT, FL 34711	
Title:	D	( ) Delete
Name:	ARNOLD, STEVE	
Address:	2113 WINTERSET RD.	
City-St-Zip:	WINTER HAVEN, FL 33884	
Title:	D	( ) Delete
Name:	SIEGENTHALER, WILLIAM	
Address:	1640 EAST ST.	
City-St-Zip:	CLERMONT, FL 34711	
Title:	D	( ) Delete
Name:	MADISON, PAUL C	
Address:	20236 SPARKMAN LANE	
City-St-Zip:	GROVELAND, FL 34736	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: JOHN W. GARVIS P 04/30/2005

Electronic Signature of Signing Officer or Director — Date