

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008566

FILED
Sep 07, 2005
Secretary of State

Entity Name: ENVISION THE FUTURE, INC.

Current Principal Place of Business:

32 SUNDUNES CIRCLE
PONCE INLET, FL 32127

New Principal Place of Business:

Current Mailing Address:

32 SUNDUNES CIRCLE
PONCE INLET, FL 32127

New Mailing Address:

FEI Number: FEI Number Applied For (X) 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:

DURTSCHI, BRAD K
32 SUNDUNES CIRCLE
PONCE INLET, FL 32127 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: DURTSCHI, BRAD K
Address: 32 SUNDUNES CIRCLE
City-St-Zip: PONCE INLET, FL 32127

Title: VP () Delete
Name: POLLOCK, PAUL
Address: 32 SUNDUNES CIRCLE
City-St-Zip: PONCE INLET, FL 32127

Title: S () Delete
Name: SCHNEIDER, LEE
Address: 2905 TURN BULL BAY
City-St-Zip: NEW SMYRNA BEACH, FL 32768

Title: T () Delete
Name: THORNTON, BRUCE
Address: 6122 HALF MOON DRIVE
City-St-Zip: PORT ORANGE, FL 32127

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:

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: BRAD K. DURTSCHI

P

09/07/2005

Electronic Signature of Signing Officer or Director

Date