2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008581

Entity Name: MACEIKONIS FAMILY FOUNDATION, INC.

Jul 07, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3470 MISTLETOE LANE 3040 GRAND BAY BLVD LONGBOAT KEY, FL 34228

UNIT 236

LONGBOAT KEY, FL 34228

Current Mailing Address: New Mailing Address:

3470 MISTLETOE LANE P O BOX 8280

LONGBOAT KEY, FL 34228 LONGBOAT KEY, FL 34228

FEI Number: 20-1574780 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: Name and Address of New Registered Agent:

MACEIKONIS, VYTAS MACEIKONIS, VYTAS 3470 MISTLETOE LANE 3040 GRAND BAY BLVD

LONGBOAT KEY, FL 34228 US **UNIT 236** LONGBOAT KEY, FL 34228 US

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: VYTAS MACEIKONIS 07/07/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PTD (X) Change () Addition () Delete

MACEIKONIS, VYTAS Name: MACEIKONIS, VYTAS Name: 3470 MISTLETOE LANE Address: 3040 GRAND BAY BLVD, UNIT 236 Address: City-St-Zip: LONGBOAT KEY, FL 34228 City-St-Zip: LONGBOAT KEY, FL 34228

Title: VSD () Delete Title: (X) Change () Addition

MACEIKONIS, GERDA Name: Name: MACEIKONIS, GERDA Address: 3470 MISTLETOE LANE Address: 3040 GRAND BAY BLVD, UNIT 236

City-St-Zip: LONGBOAT KEY, FL 34228 City-St-Zip: LONGBOAT KEY, FL 34228

Title: () Delete Title: () Change () Addition

BAND, GREGORY S Name: Name: 1680 FRUITVILLE ROAD Address: Address: City-St-Zip: SARASOTA, FL 34236 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: VYTAS MACEIKONIS PTD 07/07/2005