2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2005
Secretary of State

DOCUMENT# N04000008782

Entity Name: DREAMS OF JOY FOUNDATION, INC.

Current Principal Place of Business:

7005 LONGLEAF CREEK DRIVE
PENSACOLA, FL 32526

New Principal Place of Business:

Current Mailing Address:

7005 LONGLEAF CREEK DRIVE
PENSACOLA, FL 32526

New Mailing Address:

FEI Number: 20-0706688 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SLOCUM, JACK
7005 LONGLEAF CREEK DRIVE
PENSACOLA, FL 32526 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: PD ( ) Delete
Name: SLOCUM, JACK
Address: 7005 LONGLEAF CREEK DRIVE
City-St-Zip: PENSACOLA, FL 32526

Title: VD ( ) Delete
Name: SLOCUM, KAY
Address: 7005 LONGLEAF CREEK DRIVE
City-St-Zip: PENSACOLA, FL 32526

Title: SD ( ) Delete
Name: MOUSAW, GARY
Address: 7005 LONGLEAF CREEK DRIVE
City-St-Zip: PENSACOLA, FL 32526

Title: TD ( ) Delete
Name: FLORES, RAYMOND
Address: 7005 LONGLEAF CREEK DRIVE
City-St-Zip: PENSACOLA, FL 32526

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: TD (X) Change ( ) Addition
Name: LYNCHARD, DARYL
Address: 8158 NAVARRE PARKWAY
City-St-Zip: NAVARRE, FL 32566

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: KAY SLOCUM VD 01/05/2005

Electronic Signature of Signing Officer or Director — Date