


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 09, 2005 8:00 am
Secretary of State

03-09-2005 90031 013 ****70.00

DOCUMENT # N04000009648 1. Entity Name THE ANNIE FOUNDATION, INC.	
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Principal Place of Business 1000 ROBERTA AVENUE ORLANDO, FL 32825 US	Mailing Address 1000 ROBERTA AVENUE ORLANDO, FL 32825 US
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DO NOT WRITE IN THIS SPACE



03012005 No Chg-NP CR2E037 (10/03)

4. FEI Number 34-2020157	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent EVANS, ANNIE H 1000 ROBERTA AVENUE ORLANDO, FL 32825
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES EVANS, ANNIE H 1000 ROBERTA AVENUE ORLANDO, FL 32825
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP EVANS, SCOTT M 940 SCANDIA LANE ORLANDO, FL 32825
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC HARRIS, SHERRY L 940 SCANDIA LANE ORLANDO, FL 32825
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRES HILLER, JOHN C 1000 ROBERTA AVENUE ORLANDO, FL 32825
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANNIE H EVANS, PRES 3/2/05 407-382-7877
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR /Date Daytime Phone #