2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2005
Secretary of State

DOCUMENT# N04000011313

Entity Name: DISASTERSAFE INCORPORATED

Current Principal Place of Business:

4693 NORTH MONROE STREET
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

4693 NORTH MONROE STREET
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 81-0659492 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MADER, JOHN
3608 WESTMORELAND DRIVE
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

MADER, JOHN R
3608 WESTMORELAND DRIVE
TALLAHASSEE, FL 32303 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: JOHN R. MADER 02/21/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: C ( ) Delete
Name: MADER, JOHN
Address: 3608 WESTMORELAND DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: T ( ) Delete
Name: GRIFFIN, MONICA
Address: 1414 NORTH BRONOUGH STREET
City-St-Zip: TALLAHASSEE, FL 32303

Title: S ( ) Delete
Name: ROWE, ANN
Address: 1213 VICTORY GARDEN DRIVE
City-St-Zip: TALLAHASSEE, FL 32301

Title: CD ( ) Delete
Name: DOYLE, CHRISTOPHER
Address: 5069 OLD BAINBRIDGE ROAD
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change ( ) Addition
Name: MADER, JOHN R
Address: 3608 WESTMORELAND DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

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 R. MADER C 02/21/2005
Electronic Signature of Signing Officer or Director Date