SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $155 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $305)

NONPROFIT CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 JUL 10 AM 9:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N04574 **(2)**

1. Corporation Name
HONEYWORD FOUNDATION, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
3921 TOPSAIL DRIVE COLORADO SPRINGS CO 80918 US	P.O. BOX 25189 COLORADO SPRINGS CO 80936 - 5187 US

3. Date Incorporated or Qualified: 08/06/1984
3a. Date of Last Report: 03/23/1994
4. FEI Number: 59-2447387 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status YES! ☒ FILING FEE IS $61.25
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip 80936-5109 / 30 Country

9. Name and Address of Current Registered Agent

COOPER, EMMETT
2204 EXMOOR ROAD
TAMPA FL 33629

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VST	1.1 TITLE	☐ Change ☒ Addition
NAME	COOPER, LEA M.	1.2 NAME	
STREET ADDRESS	3921 TOPSAIL DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	COLORADO SPRINGS CO	1.4 CITY-ST-ZIP	ZIP 80918
TITLE	D	2.1 TITLE	☐ Change ☒ Addition
NAME	COOPER, LEA M.	2.2 NAME	
STREET ADDRESS	3921 TOPSAIL DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	COLORADO SPRINGS CO	2.4 CITY-ST-ZIP	ZIP 80918
TITLE	CPD	3.1 TITLE	☐ Change ☒ Addition
NAME	COOPER, EMMETT A.	3.2 NAME	
STREET ADDRESS	3921 TOPSAIL DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	COLORADO SPRINGS CO	3.4 CITY-ST-ZIP	ZIP 80918
TITLE	CEO	4.1 TITLE	☐ Change ☒ Addition
NAME	COOPER, EMMETT A.	4.2 NAME	
STREET ADDRESS	3921 TOPSAIL DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	COLORADO SPRINGS CO	4.4 CITY-ST-ZIP	ZIP 80918
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	ANDERSON, JIM	5.2 NAME	
STREET ADDRESS	P.O. BOX 1905 N/A	5.3 STREET ADDRESS	
CITY-ST-ZIP	WOODLAND PARK CO	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	☒ Change ☐ Addition
NAME	EMINETH, GARY	6.2 NAME	@ SAME
STREET ADDRESS	22876 HWY 67 SOUTH	6.3 STREET ADDRESS	SAME 16685 ROLLER COASTER ROAD
CITY-ST-ZIP	DIVIDE CO 80814	6.4 CITY-ST-ZIP	COLORADO SPRINGS, CO 80921

CR2E037 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Emmett A. Cooper 6/28/95 719-599-9221
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
EMMETT A. COOPER

0019785