2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2006
Secretary of State

DOCUMENT# N05000011561

Entity Name: RED ZONE FOUNDATION INC.

Current Principal Place of Business:

8636 HIGH CAY
WEST PALM BEACH, FL 33411

New Principal Place of Business:

Current Mailing Address:

8636 HIGH CAY
WEST PALM BEACH, FL 33411

New Mailing Address:

FEI Number: 20-3798580 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REDMOND, TERANCE A
8636 HIGH CAY
WEST PALM BEACH, FL 33411 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: P ( ) Delete
Name: REDMOND, TERANCE A
Address: 8636 HIGH CAY
City-St-Zip: WEST PALM BEACH, FL 33411

Title: SEC ( ) Delete
Name: SKOLNICK, MICHELE
Address: 14837 BALGOWAN #101
City-St-Zip: MIAMI LAKES, FL 33016

Title: TREA ( ) Delete
Name: JONES, KATHERINE T
Address: 1283 W. MCKINELY AVE. #6
City-St-Zip: SUNNYVALE, CA 94086

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition
Name: REDMOND, TERANCE A
Address: 8636 HIGH CAY
City-St-Zip: WEST PALM BEACH, FL 33411

Title: DVP (X) Change ( ) Addition
Name: SKOLNICK, MICHELE
Address: 14837 BALGOWAN #101
City-St-Zip: MIAMI LAKES, FL 33016

Title: DT (X) Change ( ) Addition
Name: JONES, KATHERINE T
Address: 1283 W. MCKINELY AVE. #6
City-St-Zip: SUNNYVALE, CA 94086

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: TERANCE A. REDMOND P 03/30/2006

Electronic Signature of Signing Officer or Director — Date