OT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Aug 30, 2007 8:00 am Secretary of State 08-07-2007 90027 003 ****61.25

DOCUMENT # N06000003491



| UNITED STATES FREEDOM FOUNDATION, INC. | | | | | | | | | | | | | |
|---|--|-----------------------------|--|----------------------|--------------|-----------------------|------------|--------------------------------|-----------------|---------------------------|--------------------------|---------------|--|
| Principal Place of Business 4640 PALLADIN ST #29 WEST PALM BEACH, FL 33417 | | | Mailing Address 4640 PALLADIN ST #29 WEST PALM BEACH, FL 33417 | | | | 66021623 | | | | | | |
| 2. Principal P | lace of Busi | ness - No P.O. Box # | 3. Mail | alling Address | | | | | | | | | |
| Suite, Apt. | #, etc. | | Suite, Apl. #, etc. | | | | 06112007 C | | | | | | |
| City & State | | | City & State | | | | _ | 4. FEI Number | hg-NP | CR2E03 | 7 (12/06) | pplied For | |
| | | | | | | | | 20-44 | 940 | | N | ot Applicable | |
| Zip | Country | | Zip | Zip Co. | | untry | | 5. Certificate of S | latus Desired | | \$8.75 Ad Fee Require | | |
| · · · · · · | 6. Name | e and Address of Current | Registere | d Agent | | Name | | 7. Name and Add | iress of New I | Registered A | gent | | |
| BOUTILIER, KENNETH 4640 PALLADIN ST #29 | | | | | | <u></u> | ss (f | P.O. Box Number is | Not Acceptab | le) | | | |
| WEST PALM BEACH, FL 33417 | | | | | | | | | | | | | |
| | | | | | | City | | | | FI | Zip Coc | ie | |
| 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. Lam familiar with, and accept | | | | | | | | | | | | | |
| the obligations of registered agent. | | | | | | | | | | | | | |
| SIGNATURE . | SIGNATURE | | | | | | | | | | | | |
| Signature, speed or printed remain of registered agent and late it sustricates (NOTE Registered Agens signature required when reinstalling) DATE | | | | | | | | | | | | | |
| Filing Fee is \$81.25 9. Election Camp Due by September 14, 2007 Trust Fund Co | | | | | | | | \$5.00 May Be Added to Fees | Flo | fake check rida Depart | ment of S | tate | |
| TITLE | OFFICERS AND DIRECTORS Debte | | | | 11. 101.1 | | A | DDITIONS/CHANG | ES TO OFFICE | | ECTORS IN | | |
| KANE | BASCH, F | C) Cent | NAM | | | | | | Claride | Addition | | | |
| STREET ADDRESS CITY-ST-ZIP | 9022 ALISTER BLVD E #204 PALM BEACH GARDENS, FL 33418 | | | | | FT ADORESS +ST-ZIP | | | | | | | |
| TITLE | S Delete | | | | mu | | | | - | | ☐ Change | Addition | |
| HAME STREET ADDRESS | | ER, KENNETH | | NAM | E E1 ADDRESS | | | | | | | | |
| CITY-SI-ZIP | 4640 PALLADIN ST #29 WEST PALM BEACH, FL 33417 | | | | | -ST-ZIP | | | | | | | |
| TITLE | D | 201111 1201111 | | Detete | Intu | | | | | | Change | ☐ Addition | |
| NAME STREET ADDRESS | I | | | | | E FT ADORESS | | | | | | | |
| CITY-ST-ZIP | | PALM BEACH, FL 33408 | 3 | | | - S1 - ZIP | | | | | | | |
| TITLE | | | | ☐ Delete | TETLI | | | | | | ☐ Change | Addition | |
| STREET ADDRESS | | | | • | | ET ADDRESS | | | | | | | |
| CITY-ST-ZIP | | | | | - | · S1-ZIP | | | | | <u>.</u> | | |
| TITLE NAME | | | | ☐ Delete | NAM | | | | | | ☐ Change | ☐ Addition | |
| STREET ADDRESS CITY-ST-ZIP | | | | | | ET ADORESS | | | | | | | |
| TITLE | | | | ☐ Delete | titu | -ST-ZIP | | | | | Change | Addition | |
| NAME | | | | La pece | NAM | : | | | | | □ oranide | | |
| STREET ADDRESS City-St-Zip | | | | , | | ET ADDRESS ST-ZIP | | | | | | ł | |
| 12. hereby o | ertify that th | e information supplied with | this tiligh | soes not qualify for | the exe | motions contain | ned i | in Chapter 119, Flor | ida Statutes. I | further certify | that the in | formation | |
| 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 eath; that I am an officer or director of the corporation or the receiver or trustee empower follo execute this/eport 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: Ken Bout / 1/27/07 951-2336. | | | | | | | | | | | | 36. | |

FROM IKEINAY QUETINE INC.

FRK NO. :5616861113

Aug. 30 2006 11:37PM P2

ID# 31217

DEPARTMENT OF THE TREASURY

INTERNAL REVENUE SERVICE P. O. BOX 2508 CINCINNATI, OH 45201

Date:JUN 2 4 2005

UNITED STATES FREEDOM FOUNDATION INC 4640 PALLADIN ST 29 WEST PAIN BEACH, PL 33417

Amployer Identification Number: 20-4494013 DLN:

17053151024046 Contact Person: JOAN C KISER

Contact Telephone Number:

(877) 829-8500

Accounting Period Ending:

December 31

Public Charity Status: 170(b)(1)(A)(vi)

Form 990 Required: Yes

Effective Date of Bumption. March 29, 2006

Contribution Deductibility:

Yes

Advance Ruling Ending Date: December 31, 2010

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2058, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organisations exempt under section \$01(c)(3) of the Code are further classified as either public charities or private foundations. During your advance ruling period, you will be treated as a public charity. Your advance ruling period begins with the effective date of your exemption and ends with advance ruling ending date shown in the heading of the letter.

Shorrly before the end of your advance ruling period. we will send you borm \$734, Support Schedule for Advance Ruling Period. You will have 90 days after the end of your advance ruling period to return the completed form. We will then notify you, in writing, about your public charity status!

Please see enclosed Information for Exempt Organizations Under Section 501(c)(3) for some helpful information about your responsibilities as an exempt organisation.

If you distribute funds to other organizations, your records must show whether they are exempt under section 501(c)(3). In cases where the recipient organization is not exampt under section 501(c)(3), you must have evidence the funds will be used for section SOL(c)(3) purposes.

Letter 1045 (DG/CG)