## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06241

Entity Name: PROPHECY COUNTDOWN, INC.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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925 N CENTRAL 35922 GATCH RD. UMATILLA, FL 32784 US EUSTIS, FL 32736

Current Mailing Address: New Mailing Address:

P. O. BOX 1844

MT DORA, FL 32756 US

FEI Number: 59-2489075 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

OSBORNE, DIANNE
925 N CENTRAL AVE
UMATILLA, FL 32784 US
OSBORNE, DIANNE
35922 GATCH RD.
EUSTIS, FL 32736 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: 04/29/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

 Title:
 D
 ( ) Delete
 Title:
 D
 (X) Change ( ) Addition

 Name:
 OSBORNE JOHN,
 Name:
 OSBORNE, JOHN W PASTOR

 Address:
 41329 SILVER DR.
 Address:
 24 MARYLAND AVE.

City-St-Zip: UMATILLA, FL City-St-Zip: POUGHKEEPSIE, NY 12603 US

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 OSBORNE, DIANNE
 Name:
 OSBORNE, DIANNE

 Address:
 41329 SILVER DR
 Address:
 35922 GATCH RD.

 City-St-Zip:
 UMATILLA, FL
 City-St-Zip:
 EUSTIS, FL 32736 US

 Name:
 SCOTT, ALAN
 Name:
 SCOTT, ALAN

 Address:
 32137 WOLFBRANCH LANE
 Address:
 16444 N. 56TH PLACE

 City-St-Zip:
 SORRENTO, FL
 City-St-Zip:
 SCOTTSDALE, AZ 85254

Title: C ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GREENFIELD, KATHLEEN,
 Name:

 Address:
 23745 BRANDI KALA LANE
 Address:

 City-St-Zip:
 HOWEY IN THE HILLS, FL 34737
 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: DIANNE OSBORNE PD 04/29/2005