2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010430

FILED May 01, 2008 Secretary of State

Current Principal Place of Business:		New Prince	New Principal Place of Business:	
661 ARCADIA A ARASOTA, FL				
Current Mailing Address:		New Mailing Address:		
661 ARCADIA A ARASOTA, FL				
El Number: FEI Number Applied For (X) FEI naccordance with s. 607.193(2)(b), F.S., the corporation did not rece lame and Address of Current Registered Agent:		I Number Not Applicable () Certificate of Status Desired () sive the prior notice. Name and Address of New Registered Agent:		
300 AÚSTRALI/ /EST PALM BE	AN AVE SOUTH SUITE 100 ACH, FL 33409 US	e of changing	its registered office or registered agent, or both	
800 AÜSTRALIA VEST PALM BE he above name n the State of Flo	AN AVE SOUTH SUITE 100 ACH, FL 33409 US d entity submits this statement for the purpos	e of changing	its registered office or registered agent, or both	
800 AÜSTRALIA VEST PALM BE he above name I the State of Flo VIGNATURE:	AN AVE SOUTH SUITE 100 ACH, FL 33409 US d entity submits this statement for the purpos	e of changing	its registered office or registered agent, or both Date	
VEST PALM BE The above name In the State of Flo	AN AVE SOUTH SUITE 100 ACH, FL 33409 US d entity submits this statement for the purposorida. Electronic Signature of Registered Agent			
800 AÜSTRALIA VEST PALM BE The above name In the State of Flo BIGNATURE:	AN AVE SOUTH SUITE 100 ACH, FL 33409 US d entity submits this statement for the purposorida. Electronic Signature of Registered Agent		Date	
800 AUSTRALIA FOR PALM BE THE ABOVE NAME THE ABOVE NAME THE ABOVE	AN AVE SOUTH SUITE 100 ACH, FL 33409 US d entity submits this statement for the purpos orida. Electronic Signature of Registered Agent DIRECTORS:	ADDITION Title: Name: Address:	Date NS/CHANGES TO OFFICERS AND DIRECTO PD () Change (X) Addition NILON, JAMES 1661 ARCADIA AVE	

I hereby certify that the information supplied with this filing does not qualify 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: JAMES NILON **PRES** 05/01/2008