2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000009994

FILED Jan 27, 2011 Secretary of State

Entity Name: E 5 SOLUTIONS FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1576 BELLA CRUZ DR, SUITE 409 1576 BELLA CRUZ DR THE VILLAGES, FL 32159

SUITE 409

THE VILLAGES, FL 32159

Current Mailing Address: New Mailing Address:

1576 BELLA CRUZ DR, SUITE 409 1576 BELLA CRUZ DR THE VILLAGES, FL 32159 SUITE 409

THE VILLAGES, FL 32159

FEI Number: 27-3833758 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:

JOSEPH, JOHN P ESQ PINELLAS LEGAL CENTER 2429 CENTRAL AVE, SUITE 201 ST PETERSBURG, FL 33713 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

DODGE, RICHARD B Name: Address: 3984 GROVE PARK DR City-St-Zip: TALLAHASSEE, FL 32311

Title:

Name: HICKMAN, RICHARD J Address: 11860 SE 178TH ST City-St-Zip: SUMMERFIELD, FL 34491

Title: SD

JOSEPH, JOHN P ESQ Name: Address: 2429 CENTRAL AVE, SUITE 201 City-St-Zip: ST PETERSBURG, FL 33713

Title: TD

Name: SMILEY, CHRISTINE L 5235 HARBOR RIDGE CT Address: City-St-Zip: LADY LAKE, FL 32159

VPD Title:

SMILEY, DOUGLAS E Name: 5235 HARBOR RIDGE CT Address: City-St-Zip: LADY LAKE, FL 32159

I hereby 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 all other like empowered.

SIGNATURE: JOHN P. JOSEPH, ESQ S 01/27/2011