## 2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

## May 04, 2005 8:00 am Secretary of State **DOCUMENT # N16927** 05-04-2005 90172 012 \*\*\*\*61.25 THE IVANHOE FOUNDATION, INC. Principal Place of Business Mailing Address 1111 N ORANGE AVE 1111 N ORANGE AVE 50047739 ORLANDO, FL 32804 ORLANDO, FL 32804 US 02092005 No Chg-NP CR2E037 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2719717 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent STEILEN, TED H DO NOT WRITE 4627 PARKBREEZE ORLANDO, FL 32808 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 Trust Fund Contribution. Due by May 1, 2005 OFFICERS AND DIRECTORS 10. TILE NAME WASHBURN, THOMAS E STREET ADDRESS 6113 PERSHING AVE CITY-ST-ZIP ORLANDO, FL DILE EARL, TRICIA STREET ADDRESS 1111 N ORANGE AVE CITY-ST-ZIP ORLANDO, FL TITLE STEILEN, TED 4627-PARKBREEZECT 3465 MALKUMY CENTEL CT. STREET ADDRESS DO NOT WRITE CITY-ST-ZIP ORLANDO, FL 32808 IN THIS SPACE TITLE NAME DAVIS, BERYL H STREET ADDRESS 400 S. ORANGE AVE CITY-ST-ZIP ORLANDO, FL TITLE ORLANDO, FL 32 814 St. Suits 10 NAME STREET ADDRESS CITY-ST-ZIP TITLE HINSON, JIM STREET ADDRESS 60 W. ROBINSON ST. ORLANDO, FL 32801 12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 in the corporation of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 in the corporation of the corporat accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director excite this report 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 addy

**FILED**