


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

FILED
Apr 08, 2005 08:00 AM
Secretary of State

DOCUMENT # N18519 1. Entity Name FOUNDATION FOR SCIENCE AND SPIRITUALITY, INC.	
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Principal Place of Business 3801 PGA BLVD., STE 555 PALM BEACH GARDENS, FL 33410 US	Mailing Address 3801 PGA BLVD., STE 555 SUITE 800 PALM BEACH GARDENS, FL 33410 US
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DO NOT WRITE IN THIS SPACE



03102005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-2780096	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent WILSON, HUNTER S 3801 PGA BLVD., STE 555 PALM BEACH GARDENS, FL 33410	DO NOT WRITE IN THIS SPACE
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PERRY, HENRY A. 3801 PGA BLVD., STE 555 PALM BEACH GARDENS, FL 33410
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D YOUNG, SUSAN 11699 RITTENHOUSE RD MARYSVILLE, OH 43040
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST WILSON, HUNTER S 3801 PGA BLVD., STE 555 PALM BEACH GARDENS, FL 33410
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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04/08/05-80069-001 61.25

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 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> HUNTER S. WILSON	Date <u>April 6, 2005</u> Daytime Phone # _____
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