

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

FILED
Apr 14, 2005 08:00 AM
Secretary of State

DOCUMENT # N28430	
1. Entity Name LAFAYETTE PENNY FOUNDATION, INC.	
Principal Place of Business P.O. BOX 884 MAYO, FL 32066	Mailing Address P.O. BOX 884 MAYO, FL 32066



04072005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2842027	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CARVER, AMY W. LAFAYETTE COUNTY COURT HOUSE ANNEX-EAST ROOM MAYO, FL 32066	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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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	U000000305858 04/14/05-80104-007 61.25
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, HUGH M. 505 N.W. DIXIE TRAIL MAYO, FL 320683011
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BELL, DOYLE 7825 N.W. C.R. 251 MAYO, FL 32068
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CERASO, MILTON E. ANGIE PO BOX 58 N/A MAYO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CROFT, W.G. JR. PO BOX 214, FLOYD & PARK MAYO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HEWETT, JOHN C. PO BOX 308, CR 400 MAYO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HURST, DONALD C. 805 S.E. BETHEL WALKER CREEK RD. BRANFORD, FL

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 all other like empowered.

SIGNATURE: HUGH M. SMITH, PRESIDENT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 8, 2005 352-332-3362
Date Daytime Phone #