

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
May 01, 2007  
Secretary of State

DOCUMENT# N38003

Entity Name: MAASAI SPECIAL PROJECTS FUND, INC.

**Current Principal Place of Business:**

MAASAI SPECIAL PROJECTS FUND, INC.  
505 BEACHLAND BLVD., PMB 264  
VERO BEACH, FL 32963

**New Principal Place of Business:**

**Current Mailing Address:**

MAASAI SPECIAL PROJECTS FUND, INC.  
505 BEACHLAND BLVD., PMB 264  
VERO BEACH, FL 32963

**New Mailing Address:**

FEI Number: 65-0216787      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

WILSON, KERRY M.  
141 5TH ST. NW #300  
WINTER HAVEN, FL 33881      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:**

Title: VD      ( ) Delete  
Name: BLACK, JEFF R  
Address: 1820 BLUE RIDGE RD  
City-St-Zip: GAINESVILLE, GA

Title: PD      ( ) Delete  
Name: STRANG, FRED FOY DR.  
Address: 1177 HOLSTON AVE  
City-St-Zip: BRISTOL, TN 37620

Title: D      ( ) Delete  
Name: FORT, ROBERT DR.  
Address: 415 WILLOW OAK CT.  
City-St-Zip: FORT MEADE, FL

Title: D      ( ) Delete  
Name: ROE, MORGAN  
Address: PO BOX 900  
City-St-Zip: WINTER HAVEN, FL 33880

Title: D      ( ) Delete  
Name: MARSHALL, CRAIG  
Address: 1249 PLUM BRANCH LANE  
City-St-Zip: FORT MILL, SC 29715

Title: D      ( ) Delete  
Name: CRAIG, CAROL  
Address: 944 FIRESTRONE ROAD  
City-St-Zip: WESTMINSTER, MD 21158

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: FRED FOY STRANG

PD

05/01/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date