


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 10, 2004 8:00 am
Secretary of State

08-10-2004 90002 022 ****61.25

DOCUMENT # N40664	
1. Entity Name FORE! KIDS FOUNDATION, INC.	

Principal Place of Business 1283 ANHINGA DR 906-347 WELLINGTON FL 33414 US	Mailing Address 1283 ANHINGA DR 906-347 WELLINGTON FL 33414 US
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2. Principal Place of Business 3140 "C" ROAD	3. Mailing Address 3140 "C" ROAD
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State LOXAHATCHEE FL	City & State LOXAHATCHEE FL
Zip 33470	Country Palm Beach
Zip 33470	Country Palm Beach

6. Name and Address of Current Registered Agent RICHARDSON, KEVIN F CLYANT & RICHARDSON, P.A. 1551 FORUM PLACE SUITE 300-C WEST PALM BEACH FL 33401	
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4. FEI Number 65-0223778	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	Zip Code
FL	

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 KEVIN RICHARDSON	DATE 8-03-04

FILE NOW: FEE IS \$61.25 Due By September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
D RICHARDSON, KEVIN F. 1551 FORUM PLACE, STE 300-C WEST PALM BEACH FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
D GADDY, COLONEL 1301 BEACHVIEW DRIVE ST SIMONS ISLAND GA	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
PSTD GREEN, KENNETH J. 2875 ANTIETAM LANE WEST PALM BEACH FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2598 SAWYER TERR. WELLINGTON FL 33414	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 all other like empowered.	
SIGNATURE: Kenneth J. Green	DATE: 8/3/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	
DAYTIME PHONE # (561) 798-9113	