2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

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

SIGNATURE:

Mar 02, 2005 8:00 am Secretary of State DOCUMENT # N40664 1. Entity Name 03-02-2005 90083 015 ****61.25 FORE! KIDS FOUNDATION, INC. Principal Place of Business Mailing Address 3140 "C" ROAD -9140 "C" ROAD LOXAHATCHEE FL LOXAHATCHEE FL 33470 50021536 2. Principal Place of Business 3. Mailing Address 2598 SAWYEL PENAGE 2598 SAWYEN Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State. Applied For 4. FEI Number VellingTon 65-0223778 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RICHARDSON, KEVIN F Street Address (P.O. Box Number is Not Acceptable) CLYANT & RICHARDSON, P.A. 1551 FORUM PLACE SUITE 300-C WEST PALM BEACH FL 33401 Zip Code 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. 2-20-05 DATE NOTE. Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2005 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE Delete TITLE ☐ Change Addition RICHARDSON, KEVIN F. NAME NAME 1551 FORUM PLACE, STE 300-C STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL CITY-ST-ZIP CITY-ST-7IP ☐ Delete ☐ Change ☐ Addition GADDY, COLONEL NAME 1301 BEACHVIEW DRIVE STREET ADDRESS STREET ADDRESS ST SIMONS ISLAND GA CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition GREEN, KENNETH J. NAME NAME 2598 SAWYER TERR STREET ADDRESS STREET ADDRESS WELLINGTON FL 33414 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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

Cenveth J. GREPN 3/20/05 561-792-9076

FILED