2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001637

300WENT#1033000001037

FILED May 18, 2008 Secretary of State

Entity Name: DEMOCRACY WORLDWIDE, INC. **Current Principal Place of Business: New Principal Place of Business:** 6833 SW 84TH AVE MIAMI, FL 33143 **Current Mailing Address: New Mailing Address:** 6833 SW 84TH AVE MIAMI, FL 33143 FEI Number: 65-0401072 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () 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: MARTONE, JOY 6833 SW 84TH AVE MIAMI, FL 33143 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete SHREEVE, KENT W Name: Name: Address: 1725 17TH ST. NW, SUITE 109 Address: City-St-Zip: WASHINGTON, DC 20009 City-St-Zip: Title: () Delete Title: () Change () Addition Name: ARGUETA, JOSE MARIA Name: Address: 1725 17TH ST., NW, SUITE 109 Address: City-St-Zip: WASHINGTON, DC 20009 City-St-Zip: Title: TS/D () Delete Title: () Change () Addition CORNWELL, DAVID Name: Name: 1100 NEW YORK AVE., SUITE 600 Address: Address: City-St-Zip: WASHINGTON, DC 20005 City-St-Zip: Title: () Delete Title: () Change () Addition Name: BRUCE, CAMERON Name: Address: 1725 17TH ST., NW, #111 Address: City-St-Zip: WASHINGTON, DC 20009 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: KENT W, SHREEVE PRES 05/18/2008