2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2005
Secretary of State

DOCUMENT# N93000001845

Entity Name: ADONIS FAMILY FARM, INC.

Current Principal Place of Business:

PO BOX 2134
FORT MYERS, FL 33901

New Principal Place of Business:

20587 CHARING CROSS CIR.
ESTERO, FL 33928

Current Mailing Address:

PO BOX 2134
FORT MYERS, FL 33901

New Mailing Address:

PO BOX 2134
FORT MYERS, FL 33902

FEI Number: 65-0426715 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAMERON, BETH B
5709 STONEHAVEN DR
NORTH FORT MYERS, FL 33903 US

Name and Address of New Registered Agent:

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: VPD ( ) Delete
Name: CAMERON, BETH
Address: 5709 STONE HAVEN DR
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: TD ( ) Delete
Name: ADAMSON, LARRY G
Address: 2547 COATEZ BLVD
City-St-Zip: FORT MYERS, FL 33901

Title: VPD ( ) Delete
Name: MEYER, KATHLEEN
Address: 1048 MANOR LAKE DR, #4
City-St-Zip: NAPLES, FL 34110

Title: P ( ) Delete
Name: CAMERON, BETH
Address: 5709 STONE HAVEN DR.
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: S (X) Delete
Name: BASHAW, MAUREEN
Address: 1456 LYNWOOD AVE
City-St-Zip: FORT MYERS, FL 33901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CAMERON, BETH
Address: 5709 STONEHAVEN DRIVE
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: V (X) Change ( ) Addition
Name: STANZ, PHYLLIS
Address: 5502 SIR WALTER WAY
City-St-Zip: NORTH FT. MYERS, FL 33917

Title: T (X) Change ( ) Addition
Name: ZEIGLER, DONALD
Address: 1702 SE 19TH LANE
City-St-Zip: CAPE CORAL, FL 33908

Title: S (X) Change ( ) Addition
Name: BASHAW, MAUREEN
Address: 1456 LYNWOOD AVENUE
City-St-Zip: FORT MYERS, FL 33901

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BETH CAMERON PRES 01/05/2005

Electronic Signature of Signing Officer or Director — Date