2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 12, 2004
Secretary of State

DOCUMENT# N93000002199

Entity Name: HANDS TO THE WORLD, INC.

Current Principal Place of Business:

2874 E. IRLO BRONSON MEMORIAL HWY
KISSIMMEE, FL 34744

New Principal Place of Business:

Current Mailing Address:

3956 TOWN CENTER BLVD., STE 278
ORLANDO, FL 32837

New Mailing Address:

FEI Number: 59-3201852 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, GARY
2001 GRANADA BLVD.
KISSIMMEE, FL 34746 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:	PD	( ) Delete
Name:	SMITH, JANIS	
Address:	2001 GRANADA BLVD.	
City-St-Zip:	KISSIMMEE, FL 34746	
Title:	VP	( ) Delete
Name:	LINDSEY, GUY	
Address:	656 ADRIANE PARK CIRCLE	
City-St-Zip:	KISSIMMEE, FL 34744	
Title:	ST	( ) Delete
Name:	FLIPPO, MICHAEL R .	
Address:	2900 PINERIDGE CIRCLE	
City-St-Zip:	KISSIMMEE, FL 34746	
Title:	D	( ) Delete
Name:	WILKER, JOHN	
Address:	2616 FLORENCE DRIVE	
City-St-Zip:	KISSIMMEE, FL 34744	
Title:	D	( ) Delete
Name:	LINK, MICHAEL	
Address:	264 OAKHURST CIRCLE	
City-St-Zip:	KISSIMMEE, FL 34744	
Title:	D	( ) Delete
Name:	TURNER, JOANNE	
Address:	1201 HANCOCK CIRCLE	
City-St-Zip:	ST. CLOUD, FL 34769	

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 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: JANIS SMITH PD 07/12/2004

Electronic Signature of Signing Officer or Director — Date