

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001097

FILED  
May 01, 2006  
Secretary of State

Entity Name: WORLD FOREST FOUNDATION, INC.

## Current Principal Place of Business:

47 CHIPPINGWOOD LN  
ORMOND BEACH, FL 32176

## New Principal Place of Business:

## Current Mailing Address:

47 CHIPPINGWOOD LN  
ORMOND BEACH, FL 32176

## New Mailing Address:

FEI Number: 59-3307827      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:

SCHULTZ, KARL F  
47 CHIPPINGWOOD LN  
ORMOND BEACH, FL 32176      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: D      ( ) Delete  
Name: SCHULTZ, KARL F III  
Address: 47 CHIPPINGWOOD LN  
City-St-Zip: ORMOND BEACH, FL

Title: DP      ( ) Delete  
Name: BROCK, WILLIAM  
Address: 1977 HWY 20  
City-St-Zip: SEDRO-WOOLLEY, WA

Title: DST      ( ) Delete  
Name: SCHULTZ, KARL F  
Address: 47 CHIPPINGWOOD LN  
City-St-Zip: ORMOND BEACH, FL 32176

Title: D      ( ) Delete  
Name: BANTLOW, EDWARD  
Address: 9 WRIGHT PLACE  
City-St-Zip: PRINCETON JUNCTION, NJ

Title: D      ( ) Delete  
Name: DONATO, ANNE  
Address: 7516 MCCALLUM ST.  
City-St-Zip: PHILADELPHIA, PA

## 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:

I hereby certify that the information supplied with this filing does not qualify for the 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: KARL F. SCHULTZ

DST

05/01/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date