2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Apr 25, 2005 8:00 am Secretary of State DOCUMENT # N96000003512 04-25-2005 90274 020 ****61.25 EXPANDING AND PRESERVING OUR CULTURAL HERITAGE, INC. Principal Place of Business Mailing Address 170 NW 5TH AVENUE 170 NW 5TH AVENUE DELRAY BEACH, FL 33444 DELRAY BEACH, FL 33444 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01032005 Chg-NP CR2E037 (10/03) Applied For 4. FEI Number 35-0688730 City & State City & State Not Applicable Zip Country Zip Country \$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 Name FARRINGTON, VERA R Street Address (P.O. Box Number is Not Acceptable) 310 NW 2ND AVE DELRAY BEACH, FL 33444 City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Make check payable to Filling Fee is \$61.25 Trust Fund Contribution. Florida Department of State Due by May 1, 2005 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. D Ralph Johnson 2441-1 E. Aragon Blyd. Delete TITLE TITLE ☐ Change FARRINGTON, VERA NAME NAME STREET ADDRESS 310 NW 2ND AVE STREET ADDRESS Sunrise, FL 33313 CITY-ST-ZIP DELRAY BEACH, FL 33444 CITY-ST-ZIP D clifford Durden Deleta TITLE ☐ Change Addition HOWARD, KENNETH NAME NAME 702 Blvd. Chatelaine E. STREET ADDRESS 5225 RAYMOND DR N STREET ADDRESS Delray Beach, FL 33445 CITY-ST-ZIP BOYNTON BEACH, FL 33437 CITY-ST-ZIP ☐ Delete Addition TITLE TITLE VAUGHN, CLARENCE NAME NAME Clarence Vaughn STREET ADDRESS 17650 WOODVIEW TERR. STREET ADDRESS 13650 Wood view Terr BOCA RATON, FL 33487 CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition DUBIN, BRAHM NAME NAME STREET ADDRESS 1300 PARK OF COMMERCE #272 STREET ADDRESS CITY-ST-7IP DELRAY BEACH, FL 33445 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition STRAGHN, ALFRED NAME STREET ADDRESS 26 SW 5TH AVE STREET ADDRESS DELRAY BEACH, FL 33444 CITY-ST-ZIP CETY-ST-ZIF VD TILLE ☐ Delete TITLE Change ☐ Addition REINGOLD, MARK NAME STREET ADDRESS 107 MACFARLANE DRIVE STREET ADDRESS DELRAY BEACH, FL 33483 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 regiener 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 changed, or on an attachyrient with an address, with all other like empowered.

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OFFICER OR DIRECTOR

SIGNATURE: LLia

FILED

Daytime Phone #