

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000959

FILED
Jan 31, 2005
Secretary of State

Entity Name: NATIONAL DEVELOPMENT FOUNDATION, INC.

Current Principal Place of Business:

4250 ALAFAYA TRAIL
SUITE 212-330
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

4250 ALAFAYA TRAIL, SUITE 212-330
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 65-0820596

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HAMLIN, CURTIS D
1205 MANATEE AVENUE WEST
BRADENTON, FL 34205 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: FLEMING, RANDALL E
Address: 4250 ALAFAYA TRAIL, SUITE 21-330
City-St-Zip: OVIEDO, FL 327659424

Title: VD () Delete
Name: VERMALES, ELIZABETH R
Address: 4250 ALAFAYA TRAIL, SUITE 212-330
City-St-Zip: OVIEDO, FL 327659424

Title: VSTD () Delete
Name: SKROCKI, CYNTHIA K
Address: 4250 ALAFAYA TRAIL, SUITE 212-330
City-St-Zip: OVIEDO, FL 327659424

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:

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: CYNTHIA K SKROCKI

VP

01/31/2005

Electronic Signature of Signing Officer or Director

Date