

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004600

FILED
Aug 19, 2007
Secretary of State

Entity Name: THE TRIBAL TRUST FOUNDATION, INC.

Current Principal Place of Business:

3801 PGA BLVD
SUITE 806
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

1801 S.FLAGLER
APARTMENT 707
W. PALM BEACH, FL 33401

Current Mailing Address:

PETER DESANCTIS
3801 PGA BLVD., SUITE 806
PALM BEACH GARDENS, FL 33410

New Mailing Address:

POBOX 5687
SANTA BARBARA, CA 93150

FEI Number: 59-3528567 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:

DESANCTIS, PETER V
3801 PGA BLVD
SUITE 806
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

ELISOFFON, JILL
1801 S. FLAGLER
APT. 707
WEST PALM BEACH, FL 33401 US

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: JILL ELISOFFON

08/19/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P/T () Delete
Name: SAVAGE, BARBARA
Address: 2495 LUCCA AVE.
City-St-Zip: LOS OLIVOS, CA 93441

Title: VP/S () Delete
Name: ELISOFFON, JILL
Address: 1801 SOUTH FLAGLER, APT. 707
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D () Delete
Name: DEWART, NIKI
Address: P.O. BOX 296
City-St-Zip: LYONS, CO 80540

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/T (X) Change () Addition
Name: SAVAGE, BARBARA
Address: 1123 CAMINO VIEJO
City-St-Zip: SANTA BARBARA, CA 93108

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 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: BARBARA SAVAGE

PRES

08/19/2007

Electronic Signature of Signing Officer or Director

Date