2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2004
Secretary of State

DOCUMENT# N99000000553

Entity Name: M.O.V.E.1, INC.

Current Principal Place of Business:

662 ACADEMY PLACE
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

662 ACADEMY PLACE
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 59-3563039 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMS, ROBERT F
220 SPRING VIEW CT
WINTER SPRINGS, FL 32708 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: WILLIAMS, ROBERT F
Address: 220 SPRINGVIEW CT
City-St-Zip: WINTER SPRINGS, FL 32708

Title: SD ( ) Delete
Name: JETTERS, DIANE
Address: 679 DOCTORS DRIVE
City-St-Zip: OVIEDO, FL 32765

Title: CD ( ) Delete
Name: LONGLEY, OLIVER W
Address: 3011 E BERUMONT LANE
City-St-Zip: EUSTIS, FL 32726

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: WILLIAMS, ROBERT F
Address: 103 MOSS WOOD CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708

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: OLIVER W. LONGLEY CD 02/20/2004

Electronic Signature of Signing Officer or Director — Date