

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001797

FILED
Jul 19, 2005
Secretary of State

Entity Name: CHRISTIAN LEWIS CHILDREN'S CANCER CARE INC.

Current Principal Place of Business:

C/O BARRY G. CRAIG, STEEL HECTOR & DAVIS
200 SOUTH BISCAYNE BLVD.
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

C/O BARRY G. CRAIG, STEEL HECTOR & DAVIS
200 SOUTH BISCAYNE BLVD.
MIAMI, FL 33131

New Mailing Address:

FEI Number: 65-0909569 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:

CRAIG, BARRY G
200 SOUTH BISCAYNE BLVD.
MIAMI, FL 33131 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: HUNT, PAUL
Address: 1 CORNFORD CLOSE, OSBASTON
City-St-Zip: MONMOUTH, UK

Title: D () Delete
Name: MOSS, PETER
Address: 11 THE HOLLOW, LINDFIELD, HAYWARDS HEATH
City-St-Zip: UNITED KINGDOM,

Title: D () Delete
Name: THOMAS, DAVID
Address: TYWRTH-Y-COED, GLANDRHYD FARM
City-St-Zip: PENYFAL, BRIDGEND, UK

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HUNT, PAUL
Address: 1 CORNFORD CLOSE, OSBASTON
City-St-Zip: MONMOUTH, GW NP25 3NT UK

Title: D (X) Change () Addition
Name: MOSS, PETER
Address: 11 THE HOLLOW, LINDFIELD,
City-St-Zip: HAYWARDS HEATH, WS RH16 2SX UK

Title: D (X) Change () Addition
Name: THOMAS, DAVID
Address: 4 HILLCOT CLOSE
City-St-Zip: LISVANE, CARDIFF, SG CF14 ONT UK

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: PETER MOSS

D

07/19/2005

Electronic Signature of Signing Officer or Director

_____ Date