2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002938

HANDLEY, KENNETH G JR

SALT LAKE CITY, UT 84108

724 FREEZE CREEK CIR

Name:

Address:

City-St-Zip:

THE HANDLEY FOUNDATION INC

FILED Jan 12, 2005 Secretary of State

Entity Nar	me: THE HAN	IDLEY FOUNDATION, INC.			
Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
	OF PALMS DR JDERDALE, FL	. 33301			
Current Mailing Address:			New Mailing Address:		
2400 E LAS OLAS BLVD 423				2400 E LAS OLAS BLVD PMB 423	
FORT LAUDERDALE, FL 33301		FORT LAUDERDALE, FL 33301			
FEI Number:	: 58-2469598	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Addres	Name and Address of New Registered Agent:	
2400 E. LA PMB 423	, RICHARD L AS OLAS BLVD JDERDALE, FL				
	named entity s e of Florida.	submits this statement for the p	ourpose of changing its registe	ered office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	HANDLEY, RÌCI 617 ISLE OF PA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DV () HOUGHTON, HI 1016 FIFTH AVI NEW YORK, N	E	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DPT () HANDLEY, STE 10 AZURE BRA GRANTHAM, NH	E PO BOX 630	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	DV ()	Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: RICHARD L. HANDLEY D 01/12/2005