2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2005
Secretary of State

DOCUMENT# N99000006704

Entity Name: PAUL E. & BEATRICE A. SEBASTIAN FOUNDATION, INC.

Current Principal Place of Business:

220 S. COLLIER BLVD., #405
MARCO ISLAND, FL 34145

New Principal Place of Business:

Current Mailing Address:

3838 TAMIAMI TR. N.
#300
NAPLES, FL 34103

New Mailing Address:

FEI Number: 59-3608851 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GOODMAN BREEN & GIBBS, P A
3838 TAMIAMI TRAIL NORTH
SUITE 300
NAPLES, FL 34103 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:	SEBASTIAN, PAUL E	
Address:	220 S. COLLIER BLVD., #405	
City-St-Zip:	MARCO ISLAND, FL 34145	
Title:	D	( ) Delete
Name:	SEBASTIAN, BEATRICE A	
Address:	220 S. COLLIER BLVD., #405	
City-St-Zip:	MARCO ISLAND, FL 34145	
Title:	D	( ) Delete
Name:	SEBASTIAN, THOMAS E	
Address:	12825 KELLY AVE.	
City-St-Zip:	CHASKA, MN 44318	
Title:	D	( ) Delete
Name:	SANTARELLI, MARY P	
Address:	1746 32ND AVE	
City-St-Zip:	KEIVOSIFN, WI 5314	

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:	
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: KENNETH D. GOODMAN MGR 02/28/2005

Electronic Signature of Signing Officer or Director — Date