2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005
Secretary of State

DOCUMENT# P04000048165

Entity Name: A NATURE ENCOUNTER COMPANY

Current Principal Place of Business:

P.O.BOX 2188
LAKE CITY, FL

New Principal Place of Business:

P.O.BOX 2188
LAKE CITY, FL 32056

Current Mailing Address:

P.O.BOX 2188
LAKE CITY, FL

New Mailing Address:

P.O.BOX 2188
LAKE CITY, FL 32056

FEI Number: 84-1641378 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHMIDT, STEVEN S
RT 6 BOX 342
LAKE CITY, FL 32025 US

Name and Address of New Registered Agent:

SCHMIDT, STEVEN D PTS
P.O.BOX 2188
LAKE CITY, FL 32056 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: STEVEN D. SCHMIDT 04/28/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTS ( ) Delete
Name: SCHMIDT, STEVEN D
Address: P.O.BOX 2188
City-St-Zip: LAKE CITY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change ( ) Addition
Name: SCHMIDT, STEVEN D
Address: P.O.BOX 2188
City-St-Zip: LAKE CITY, FL 32056

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN D. SCHMIDT PTS 04/28/2005
Electronic Signature of Signing Officer or Director Date