2005 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P04000087404 02-07-2005 90101 029 ***150.00 1. Entity Name GODVA INVESTMENTS, INC. Principal Place of Business **Mailing Address 54 MILESTONE WAY 54 MILESTONE WAY** 66004345 WEST PALM BEACH, FL 33415 WEST PALM BEACH, FL 33415 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01262005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Country \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent ess of New Registered Agent ANTILL, RONALD E 12847 S. SHORE DRIVE PALM BEACH GARDENS, FL 33410 Zip Code **53 4 / 5** 8. The above named entity submits this statement for the purpose of changing its registered office or the obligations of registered agent. 9. Election Campaign Financing \$5.00 May Bo FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete ☐ Change ☐ Addition HAME GODFREY, ALBERT G JR MARKE 54 MILESTONE WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33415 CITY-ST-ZIP TITLE ☐ Delete MLE ☐ Change ☐ Addition GODFREY, ALBERT A NAME STREET ADDRESS 14873 ORANGE BLVD. STREET ADDRESS CITY-ST- DP LOXAHATCHEE, FL 33470 CITY-ST-ZIP TITLE Detete TITLE ☐ Change ☐ Addition MALE . VARAH, KLLIE J NAME STREET ADDRESS 200 NORTH MILL CT. STREET ADDRESS ATLANTA, GA 30328 CITY-ST-ZP CITY-ST-7P TIELS ☐ Octor TITLE ☐ Change Addition NAME KAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7P मार Delete TALE ☐ Change € Addition NAME **** STREET ADDRESS STREET ADDRESS CITY-ST-2P CITY-ST-ZIP MLE ☐ Delete TITLE ☐ Change ☐ Addition NUME MANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZZP 12. I hereby certify that the information supplied with this filing does not quality 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. 22 Albort G. God Pey Ja 1-27-05

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