2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05827

FILED Apr 27, 2005 Secretary of State

Entity Name: TE-TA-MA TRUTH FOUNDATION-FAMILY OF URI, INC.

Current Principal Place of Business: New Principal Place of Business:

2631 HILLCREST ROAD MEDFORD, OR 97504 US

Current Mailing Address: New Mailing Address:

P.O. BOX 1147 P.O. BOX 1147

ASHLAND, OR 97520 ASHLAND, OR 97520 US

FEI Number: 94-2385796 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROBINSON, BONITA M

8402 BOXWOOD DR

TAMPA, FL 33615 US

RODRIGUEZ, FRANCES
28624 FALLING LEAVES WAY
WESLEY CHAPEL, FL 33543 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: FRANCES RODRIGUEZ 04/27/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: SPD () Delete Title: PD (X) Change () Addition

 Name:
 URI, D'ANDELICA M
 Name:
 URI, D'ANGELICA MIRIAM

 Address:
 PO BOX 1147,NA
 Address:
 PO BOX 1147

 City-St-Zip:
 ASHLAND, OR 97520
 City-St-Zip:
 ASHLAND, OR 97520

Title: TVD () Delete Title: TVD (X) Change () Addition Name: URI, JAMES GERMAN Name: URI, JAMES GERMAIN

Name: URI, JAMES GERMAN Name: URI, JAMES GERMAIN
Address: PO BOX 1147,NA Address: PO BOX 1147
City-St-Zip: ASHLAND, OR 97520 City-St-Zip: ASHLAND, OR 97520

Title: D () Delete Title: D (X) Change () Addition
Name: URI, GRACE MARAMA, Name: URI, GRACE MARAMA

Address: PO BOX 1147,NA Address: PO BOX 1147
CitysSt-Zin: ASHI AND OR 97520

City-St-Zip: ASHLAND, OR 97520 City-St-Zip: ASHLAND, OR 97520

Title: PD () Delete Title: D (X) Change () Addition Name: URI, D'ANGELICA MIRI, AM Name: RODRIGUEZ, JOSE A Address: PO BOX 1147.NA Address: 28624 FALLING LEAVES WAY

Address: PO BOX 1147,NA Address: 28624 FALLING LEAVES WAY
City-St-Zip: ASHLAND, OR 97520 City-St-Zip: WESLEY CHAPEL, FL 33543

Title: () Delete Title: SD () Change (X) Addition Name: Name: RODRIGUEZ, FRANCES

 Name:
 Name:
 RODRIGUEZ, FRANCES

 Address:
 Address:
 28624 FALLING LEAVES WAY

 City-St-Zip:
 City-St-Zip:
 WESLEY CHAPEL, FL 33543

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 WARLICK, ANGELA LYNN

 Address:
 Address:
 P.O. BOX 1147

 City-St-Zip:
 City-St-Zip:
 ASHLAND, OR 97520

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: JAMES GERMAIN URI TVD 04/27/2005