2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 28, 2005 8:00 am Secretary of State

1. Entity Name	MENT # P40821 ORY HOUR INC.						01-28-2005	90034 02	6 ****70.0	00
Principal Place 464 WEST FE BERRIEN SPR		Mailing Address 464 WEST FERRY, BOX 15 BERRIEN SPRINGS, MI 49103						5	00 07 9	26
2. Principal Pt	ace of Business	3. Mailing A	ddress							
Suite, Apt. #, etc.		Suite, Apt. #, etc.				01242005	Chg-NP	CR2E0	37 (10/03)	
City & State		City & S			4. FEI Number 38-1549				plied For t Applicable	
Zip Country		Zip		Country	5. Certificate of Sta		of Status Desired	A	\$8.75 Add Fee Required	
	6. Name and Address of Current	Registered Ag	ent			7. Name and	Address of New	Registered	Agent	
CONTALE	7 DAVID			Name						
GONZALEZ, DAVID POST OFFICE BOX 21 1655 E SEMORAN			Street	Street Address (P.O. Box Number is Not Acceptable)						
APOPKA, I	FL 32810			City				FL	Zip Code	3
	named entity submits this statement for	. 41					in the Company		- Indetition with	
	ions of registered agent.	i the pulpose o	or changing its re	gistered office t	oi register	red agent, or boll	i, in the state of t	rionua. Tam	Iditiod Witt,	and accept
4 mm - 1.				100						
SIGNATURE .			·	 ' '	-					
	Signature, typed or printed name of registered agent	and title if applicable.	. (NOTE: F	legistered Agent sign	atura required	d when reinstating)		· DATE	7.1	1
1.2	Signature, typed or printed name of registered agent	<u></u>	, . .	legistered Agent sign	-1	d when reinstating)	<u> </u>		*	1.1 **
	Filling Fee Is \$61.25 Due by May 1, 2005	<u></u>	. Election Camp Trust Fund Co	aign Financing	-1	\$5.00 May Be Added to Fees		Make chec	k payable to	3 (;)
1.2	Filing Fee is \$61.25	9	. Election Camp	aign Financing	; '□	\$5.00 May Be	FI	Make chec orida Depa	k payable to	o tate
1 - 2	Filing Fee Is \$61.25 Due by May 1, 2005 OFFICERS AND DI	9 RECTORS	. Election Camp	aign Financing	; '□	\$5.00 May 8e Added to Fees	FI	Make chec orida Depa	k payable to	o tate
10. TITLE NAME	Filing Fee is \$61.25 Due by May 1, 2005 OFFICERS AND DI BMD METCALF, TED	9 RECTORS	. Election Camp Trust Fund Co	aign Financing ntribution. 11. TITLE NAME	<u>;</u>	\$5.00 May 8e Added to Fees	FI	Make chec orida Depa	k payable to	o late
10. TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2005 OFFICERS AND DI BMD METCALF, TED RT 2 BOX 156	9 RECTORS	. Election Camp Trust Fund Co	aign Financing ntribution. 11. TITLE NAME STREET ADDRESS	<u>;</u>	\$5.00 May 8e Added to Fees	FI	Make chec orida Depa	k payable to	o late
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 Due by May 1, 2005 OFFICERS AND DI BMD METCALF, TED RT 2 BOX 156 FLETCHER, NC 28732	9 RECTORS	Election Camp Trust Fund Co	aign Financing ntribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>;</u>	\$5.00 May 8e Added to Fees	FI	Make chec orida Depa	k payable to rtment of St IRECTORS IN	late 10 Addition
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12. I hereby certify that the information supplied with this filing does not qualify 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 617, 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.

SIGNATURE:

AME OF SIGNING OFFICER OR DIRECTOR

AME OF SIGNING OFFICER OR DIRECTOR

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