2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000091126

Entity Name: PRAIRIEVIEW, INC.

FILED Apr 26, 2005 Secretary of State

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

56 LEE DRIVE 1501 WEST 24 ST ST. AUGUSTINE, FL 32080 SUNSET ISLAND III

MIAMI BEACH, FL 33140 US

Current Mailing Address: New Mailing Address:

56 LEE DRIVE 1501 WEST 24 ST ST. AUGUSTINE, FL 32080 US SUNSET ISLAND III

MIAMI BEACH, FL 33140 US

FEI Number: 59-3286975 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:

PORTER, DWAYNE D PORTER, CHARLES K 56 LEE DR. 1501 WEST 24 ST ST. AUGUSTINE, FL 32080 US SUNSET ISLAND III

MIAMI BEACH, FL 33140 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: CHARLES K. PORTER 04/26/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: PORTER, ANNETTE M Name: PORTER, CHARLES K
Address: 56 LEE DRIVE Address: 1501 WEST 24 ST, SUNSET ISLAND III

 Address:
 56 LEE DRIVE
 Address:
 1501 WEST 24 ST, SUNSET ISLAND III

 City-St-Zip:
 ST. AUGUSTINE, FL 32084
 City-St-Zip:
 MIAMI BEACH, FL 33140

71. A000011NE, 1 E 32004 Oity-3t-2ip. WIAWI BEACH, 1 E 3314

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

Name: PORTER, JAMES B. Name: PORTER, MARGIT K

Address: 11750 CLONLEE AVE Address: 1501 WEST 24 ST, SUNSET ISLAND III

City-St-Zip: GRANADA HILLS, CA 91344 City-St-Zip: MIAMI BEACH, FL 33140

 Name:
 PORTER, MARGIT G
 Name:

 Address:
 1501 WEST 24 ST., SUNSET ISLAND #3
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33140
 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES K. PORTER MR. 04/26/2005