

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000100591

FILED
Mar 24, 2005
Secretary of State

Entity Name: THE DWN2EARTH EXPERIENCE, INC.

Current Principal Place of Business:

403 BAMBOO LANE
LARGO, FL 33770

New Principal Place of Business:

811 JACARANDA DRIVE
LARGO, FL 33770

Current Mailing Address:

403 BAMBOO LANE
LARGO, FL 33770

New Mailing Address:

811 JACARANDA DRIVE
LARGO, FL 33770

FEI Number: 51-0426644

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
660 EAST JEFFERSON STREET
TALLAHASSEE, FL 323010000 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CAMPBELL, JOHN
Address: 403 BAMBOO LANE
City-St-Zip: LARGO, FL 33770

Title: D () Delete
Name: KOSKI, ARTHUR
Address: 403 BAMBOO LANE
City-St-Zip: LARGO, FL 33770

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: ARTHUR KOSKI

PRES

03/24/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date