2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

NAME STREET ADDRESS CETY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED Apr 26, 2004 08:00 AM **DOCUMENT # 700203 Secretary of State** 1. Entity Name THE J.N. MCARTHUR FOUNDATION, INC. Principal Plane of Business Mailing Address 80 S.W. 8TH STREET 80 S.W. 8TH STREET **SUITE 2110** SUITE 2110 MIAMI, FL 33130 US MIAMI, FL 33130 03012004 No Chg-NP CR2E037 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-6063228 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DAVIS, NANCY J. DO NOT WRITE 80 S.W. 8TH STREET **SUITE 2110** IN THIS SPACE MIAMI, FL 33130 . 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) DATE U00000132931 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 Due by May 1, 2004 Trust Fund Contribution. Added to Fees 04/27/04-80064-018 61.25 10. OFFICERS AND DIRECTORS TITLE NAME, LASKIN, LINDA DAVIS STREET ADDRESS 80 SW 8TH ST. STE, 2110 CITY-ST-ZIP MIAMI, FL 33130 TIRE NAME DAVIS, RHODES J STREET ADDRESS 80 SW 8TH ST. STE. 2110 CITY-ST-7IP MIAMI, FL 33130 TITLE PΩ NAME DAVIS, NANCY J STREET ADDRESS 80 SW 8TH ST. STE. 2110 DO NOT WRITE CITY-ST-ZIP MIAMI, FL TILE IN THIS SPACE NAME JAMES, ADELHEID E STREET ADDRESS 80 S.W. 8TH STREET, SUITE 2110 CITY-ST-ZIP MIAMI, FL 33130 TITLE

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), 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: