
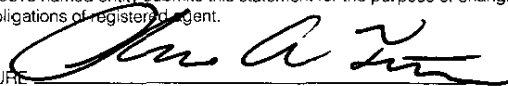
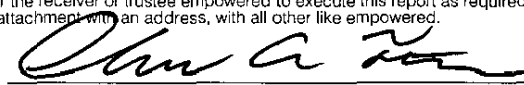


**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 26, 2004 8:00 am**  
**Secretary of State**

04-26-2004 90439 045 \*\*\*\*61.25

<b>DOCUMENT # 708668</b>			
1. Entity Name <b>FELLOWSHIP INCORPORATED</b>			
Principal Place of Business 140 N W 44TH ST OAKLAND PARK, FL 33309		Mailing Address 140 N W 44TH ST OAKLAND PARK, FL 33309	
2. Principal Place of Business		3. Mailing Address <b>C/O CHARLES FISCHER</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc. <b>9900 W. SAMPLERD STE 300</b>	
City & State		City & State <b>CORAL SPRINGS, FL</b>	
Zip		Zip <b>33065</b>	
Country		Country <b>USA</b>	
4. FEI Number <b>59-6159363</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent <b>BLACK, TERRY</b> 3930 NE 5TH AVE FORT LAUDERDALE, FL 33334		7. Name and Address of New Registered Agent Name <b>CHARLES FISCHER</b> Street Address (P.O. Box Number is Not Applicable) <b>9900 W. SAMPLE RD. STE 300</b> City <b>CORAL SPRINGS, FL 33065</b> Zip Code	
8. 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:  <b>CHARLES FISCHER</b> 9900 W. SAMPLE RD. STE 300 CORAL SPRINGS, FL 33065 DATE: <b>4/22/04</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>			
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SC THOMPSON, TOM 266 NW 90 AVENUE CORAL SPRINGS, FL 33071 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TREASURER</b> <b>CHARLES FISCHER</b> <b>9900 W. SAMPLERD STE 300</b> <b>CORAL SPRINGS, FL 33065</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C CASHERA, STEVE 900 SE 1 ST #16 POMPANO BEACH, FL 33060 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DIRECTOR</b> <b>SYONEY KING</b> <b>211 NW 76 AVE</b> <b>MARGATE, FL 33063</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T THATCHER, PAUL 3758 PEBBLE BROOK MANOR COCONUT CREEK, FL 33073 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DIRECTOR</b> <b>MIKE BINDOR</b> <b>140 N W 44 ST</b> <b>OAKLAND PARK, FL 33309</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD TOLLMANGE, RON 5560 SW 2 CT PLANTATION, FL 33317 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LEE, DICK 2895 NW 92 AVENUE CORAL SPRINGS, FL 33065 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THOMAS, JOHN 9601 NW 72 MANOR TAMARAC, FL 33321 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:  <b>CHARLES FISCHER</b> Date: <b>4/21/04</b> Daytime Phone #: <b>954 340 7474</b>			

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