


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 28, 2004 8:00 am**  
**Secretary of State**

04-28-2004 90171 003 \*\*\*\*70.00

<b>DOCUMENT # 761785</b> 1. Entity Name <b>FOOD FOR THE POOR, INC.</b>					
Principal Place of Business <b>550 SW 12TH AVE. BUILDING #4 DEERFIELD BEACH, FL 33442</b>			Mailing Address <b>550 SW 12TH AVE. BUILDING #4 DEERFIELD BEACH, FL 33442</b>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number <b>59-2174510</b>	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent <b>PRICE, DAVID T 550 S.W. 12TH AVENUE BLDG. 4 DEERFIELD BEACH, FL 33442</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				FL Zip Code	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)				DATE	
<b>Filing Fee is \$61.25 Due by May 1, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>				<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD MAHOOD, ROBIN 550 SW 12TH AVE BLDG 4 DEERFIELD BEACH, FL	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Mahfood, Robin 550 SW 12th Ave. Bldg. 4 Deerfield Beach, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BONINA, GRACE 550 SW 12TH AVE BLDG 4 DEERFIELD BEACH, FL	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Kennedy, P. Todd 1675 Palm Beach Lakes Blvd.St 700 West Palm Beach, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ISSA, FRANCIS PO BOX 470007 CELEBRATION, FL 34747	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Most Rev. Paul M. Boyle 20 Perth Road, Box 8 Mandeville, Jamaica W.I.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEREIRA, ALVARO J 1968 ROTHERHAM WAY ATLANTA, GA 30338	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Rt. Rev. Frade, Leopold 525 NE 15th St. Miami, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAMKISSOON, FR GREGORY 550 SW 12TH AVE BLDG 4 DEERFIELD BEACH, FL	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Lorden, Thomas A. 1819 Elmwood Rd. Rockford, IL 61103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PRICE, DAVID T 550 SW 12TH AVE. BLDG 4 DEERFIELD BEACH, FL 33442	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST Price, David T 550 SW 12th Ave Bldg. 4 Deerfield Beach, FL 33442
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.					
<b>SIGNATURE:</b> <i>David T. Price</i> Date: <i>4-15-04</i> Daytime Phone #					

*Attachment*

**2004 UNIFORM BUSINESS REPORT (UBR)  
DOCUMENT #761785  
#11 ADDITIONAL LIST OF OFFICERS/DIRECTORS**

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MAINGOT, RHONDA  
109 Frederick Street  
Port of Spain, Trinidad W.I.