

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762010

FILED
May 09, 2004
Secretary of State**Entity Name:** FRIENDS OF THE ARTHUR R. MARSHALL LOXAHATCHEE NATIONAL WILDLIFE REFUGE, INC.**Current Principal Place of Business:**10216 LEE ROAD
BOYNTON BEACH, FL 334372737 US**New Principal Place of Business:****Current Mailing Address:**10216 LEE ROAD
BOYNTON BEACH, FL 334372737 US**New Mailing Address:****FEI Number:** 59-2152926**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ROSENHEIM, MITCHELL S
4787 PINEVIEW CIRCLE E
DELRAY BEACH, FL 33445 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

OFFICERS AND DIRECTORS:**Title:** D () Delete
Name: CERIER, JEAN
Address: 10216 LEE ROAD
City-St-Zip: BOYNTON BEACH, FL 33437**Title:** D () Delete
Name: COGSWELL, RUTH
Address: 10216 LEE ROAD
City-St-Zip: BOYNTON BEACH, FL 33437**Title:** D () Delete
Name: GOLDSMITH, PEARL
Address: 10216 LEE ROAD
City-St-Zip: BOYNTON BEACH, FL 33437**Title:** D () Delete
Name: HECKER, LEW
Address: 10216 LEE ROAD
City-St-Zip: BOYNTON BEACH, FL 33437**Title:** D () Delete
Name: JACOBS, BARBARA
Address: 10216 LEE ROAD
City-St-Zip: BOYNTON BEACH, FL 33437**Title:** D () Delete
Name: LEVOW, RUTH
Address: 10216 LEE ROAD
City-St-Zip: BOYNTON BEACH, FL 33437**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
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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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEAN POLESHUCK

PRES

05/09/2004

Electronic Signature of Signing Officer or Director

Date