## 2004 NOT-FOR-PROFIT CORPORATION 45 ANNUAL REPORT

## EII ED

May 03, 2004 8:00 an
Secretary of State
05-03-2004 90762 022 ****61.25

DOCUMENT # F00000000111 THE INTERNATIONAL PRECIOUS METALS INSTITUTE, INC. Principal Place of Business 14017829 Mailing Address 4400 BAYOU BLVD 4400 BAYOU BLVD SUITE 18 SUITE 18 PENSACOLA, FL 32503-1908 PENSACOLA, FL 32503-1908 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02292004 Chg-NP CR2E037 (10/03) 4. FEI Number 06-0952238 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 City Zip Code FI 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filing Feetis \$61.25 Make check payable to \$5.00 May Be П Due by May 1, 2004 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE Defete DTLE ED ☐ Change M Addition arry manziek 3431 Riuer Gardens cikle DURNEY TIN T DR NAME NAME 19 DELWOOD DR STREET ADDRESS 3431 STREET ADDRESS BERLIN, NJ 08009 CITY-ST-ZIP CITY-ST-ZIP 32514 Pensacola TITLE VD ☐ Delete TITLE ☐ Change Addition ROBERTS: ANDREW D NAME NAME 102 LARGO VISTA STREET ADDRESS STREET ADDRESS KEMAH, TX 77565 CITY-ST-ZIP CITY-ST-ZIP PΩ TITLE ☐ Delete PPD ☐ Change ☐ Addition KAYE, ALAÑIR NAME NAME STREET ADDRESS 124 MARK LANE STREET ADDRESS CITY-ST-ZIP ATLANTIC BEACH, NY 11509 CITY-ST-ZIP TITLE SD Delete TITLE ☐ Change ☐ Addition NAME BEIRNE, KEVIN NAME 1167 SYLVAN DR STREET ADDRESS STREET ADDRESS TOMS RIVER, NJ 08753 CITY-ST-7IP CITY-ST-ZIP TITLE TD ☐ Delete ☐ Change TITLE ☐ Addition NAME SAADA, FRED NAME 15 HONEYSUCKLE LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MATAWAÑÃNJ 07747 CITY-ST-ZIP Addition TITLE ☐ Delete TITLE ☐ Change T

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 trusted 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 s, with all other

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

SIGNATURE AND TYP IAME OF SIGNING OFFICER OR DIRECTOR

\*DRUMMOND

HEARTH COUR

HOWELL