

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2004 8:00 am
Secretary of State

03-12-2004 90016 022 ****61.25

DOCUMENT # F01000003939
 1. Entity Name
 MARK J. GORDON FOUNDATION, INC.



Principal Place of Business: 2875 N.E. 191st Street
 1200 S PINE ISLAND RD Suite 400
 STE-200 Aventura FL 33180
 FORT LAUDERDALE, FL 33324

Mailing Address: 2875 N.E. 191st Street
 1200 S PINE ISLAND RD Suite 400
 STE-200 Aventura, FL 33180
 FORT LAUDERDALE, FL 33324

54017779



01272004 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0995291 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

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6. Name and Address of Current Registered Agent
 PRESIDENTIAL SULTES, LTD.
~~1200 S PINE ISLAND STE 200~~ 2875 N.E. 191st Street
 FORT LAUDERDALE, FL 33324 Suite 400
 Aventura FL 33180

DO NOT WRITE IN THIS SPACE

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: Joan Papadakis JOAN PAPADAKIS 2/26/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
 Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DPST
NAME	GORDON, MARK J 2875 N.E. 191st Street
STREET ADDRESS	1200 S PINE ISLAND RD Suite 400
CITY-ST-ZIP	FORT LAUDERDALE, FL 33324 Aventura FL 33180
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: Joan Papadakis JOAN PAPADAKIS 2/26/04 305-370-7112
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #