2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008056

Entity Name: HIGH HOPES FOR CHILDREN, INC.

Jul 12, 2004 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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3710 NW 71ST STREET 3910 NW 43RD ST

COCONUT CREEK, FL 33073 COCONUT CREEK, FL 33073

Current Mailing Address: New Mailing Address:

3710 NW 71ST STREET 3910 NW 43RD ST

COCONUT CREEK, FL 33073 COCONUT CREEK, FL 33073

FEI Number: 34-1979757 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KRATZ, D. BRUCE C/O JECK HARRIS & JONES LLP 1061 E INDIANTOWN ROAD SUITE 400 JUPITER, FL 33477 US

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

() Delete LUXON, ELIZABETH Name: 3710 NW 71ST STREET Address: City-St-Zip: COCONUT CREEK, FL 33073

Title: () Delete Name: CODEY, CAREY Address: 2601 10TH AVE #201 City-St-Zip: LAKE WORTH, FL 33461

Title: () Delete GIANCOLA, JAMES Name: 1279 SUGAR PLUM DRIVE Address: City-St-Zip: BOCA RATON, FL 33486

Title: () Delete GIANCOLA, MICHELE Name: Address: 1279 SUGAR PLUM DRIVE City-St-Zip: BOCA RATON, FL 33486

Title: () Delete PENDLEY, DEBRA TUGGLE Name:

4910 PARAMOUNT DRIVE Address: LOUISVILLE, KY City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

LUXON, ELIZABETH Name: Address: 3910 NW 43RD STREET City-St-Zip: COCONUT CREEK, FL 33073

Title: DS (X) Change () Addition

Name: CODEY, CAREY Address: 2601 10TH AVE #201 City-St-Zip: LAKE WORTH, FL 33461

Title: (X) Change () Addition

Name: ARTZI, STEVE Address: 9002 SAVONA WIND DR City-St-Zip: DELRAY BEACH, FL 33442

Title: (X) Change () Addition

Name: WILLIAMS, PATTI Address: 3217 SW 3RD ST

City-St-Zip: DEERFIELD B EACH, FL 33442

Title: () Change () Addition

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: ELIZABETH LUXON DCP 07/12/2004