

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 06, 2004
Secretary of State**

DOCUMENT# N04172

Entity Name: SICKLE CELL FOUNDATION, INCORPORATED

Current Principal Place of Business:

New Principal Place of Business:

110 W. 5TH AVE.
TALLAHASSEE, FL 32303 US

Current Mailing Address:

New Mailing Address:

110 W. 5TH AVE.
TALLAHASSEE, FL 32303 US

FEI Number: 59-2518049

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:

MORGAN, CATHY
110 W. 5TH AVENUE
TALLAHASSEE, FL 32303 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ED () Delete
Name: CATHY A MORGAN,
Address: 307 VANTAGE PT LN 31
City-St-Zip: TALLAHASSEE, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: HOLIDAY, ERVIN,
Address: ROUTE 17, BOX 1530
City-St-Zip: TALLAHASSEE, FL 32308

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: PARKS, DARYL
Address: 3219 THOMASVILLE RD 1-B
City-St-Zip: TALLAHASSEE, FL 32312

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S () Delete
Name: MCLEOD, CLINTON
Address: 1353 E LAFAYETTE ST
City-St-Zip: TALLAHASSEE, FL 32301

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T () Delete
Name: LANIER, HOMER,
Address: 2000 BUSHY HALL ROAD
City-St-Zip: TALLAHASSEE, FL 32308

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: CATHY MORGAN

MS.

05/06/2004

Electronic Signature of Signing Officer or Director

Date