2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25401

FILED Apr 30, 2004 Secretary of State

Entity Name: AL-ANON INFORMATION SERVICE OF BROWARD CO., INC.

	Current Principal Place of Business:			New Principal Place of Business:	
PRO AM B SUITE 205 FT LAUDE		US			
Current Mailing Address:		New Maili	New Mailing Address:		
1915 NE 4					
SUITE 205		US			
FEI Number:	FEIT	Number Applied For()	FEI Number Not Appl	icable (X) Certificate of Status Desired (X)	
Name and	Address of Curren	t Registered Agent:	Name and	Address of New Registered Agent:	
	NNIFER EMMINGWAY CIRCL D BEACH, FL 33063				
	named entity submit e of Florida.	s this statement for the բ	ourpose of changing i	s registered office or registered agent, or both,	
SIGNATUF					
	_	nature of Registered Ag	ent	Date	
OFFICERS	S AND DIRECTORS	:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS	
	DC () Delete		Title:	/ \ Change / \ Addition	
√ame: Address:	KAUFMAN, PATIRICA E 4208 NW 73RD AVE CORAL SPRINGS, FL		Name: Name: Address: City-St-Zip:	() Change () Addition	
Name: Address: City-St-Zip: Fitle: Name: Address:	KAUFMAN, PATIRICA E 4208 NW 73RD AVE	33065	Name: Address:	DT (X) Change () Addition WALKDEN, JAMES D 6146 NW 24 COURT MARGATE, FL 33063	
Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	KAUFMAN, PATIRICA E 4208 NW 73RD AVE CORAL SPRINGS, FL DT () Delete NAGLE, MARGIE 3850 GALT OCEAN DR	33065 : FL 33308	Name: Address: City-St-Zip: Title: Name: Address:	DT (X) Change () Addition WALKDEN, JAMES D 6146 NW 24 COURT	
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Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Name: Name: Address:	KAUFMAN, PATIRICA E 4208 NW 73RD AVE CORAL SPRINGS, FL DT () Delete NAGLE, MARGIE 3850 GALT OCEAN DE FORT LAUDERDALE, F D () Delete DAVIS, JENNIFER 4773 N. HEMMINGWA' MARGATE, FL 33063 D () Delete MCDONALD, DEBBIE 12155 NW 31ST ST.	33065 FL 33308 Y CIRCLE	Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: City-St-Zip:	DT (X) Change () Addition WALKDEN, JAMES D 6146 NW 24 COURT MARGATE, FL 33063 () Change () Addition	

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: JENNIFER A. DAVIS D 04/30/2004