## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33353

FILED Jun 24, 2004 Secretary of State

Entity Name: CITIZENS COMMISSION ON HUMAN RIGHTS OF FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

305 N FORT HARRISON AVE CLEARWATER, FL 33755 US

Current Mailing Address: New Mailing Address:

305 N FORT HARRISON AVE CLEARWATER, FL 33755 US

FEI Number: 59-2973520 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:

MARY DEMOSS MARY PANTON

305 N. FORT HARRISON AVENUE 305 N. FORT HARRISON AVENUE CLEARWATER, FL 33755 US CLEARWATER, FL 33755 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: MARY PANTON 06/24/2004

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: SD ( ) Delete Title: SD (X) Change ( ) Addition

 Name:
 DEMOSS, MARY
 Name:
 PANTON, MARY

 Address:
 315 EDGEWOOD AVE.
 Address:
 315 EDGEWOOD AVE.

 City-St-Zip:
 CLEARWATER, FL 33755
 City-St-Zip:
 CLEARWATER, FL 33755

Title: TD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ADAMS, ELIZABETH
 Name:

 Address:
 315 EDGEWOOD AVE.
 Address:

 City-St-Zip:
 CLEARWATER, FL 33755
 City-St-Zip:

Title: SD (X) Delete Title: ( ) Change ( ) Addition

 Name:
 BERNAL, MARIA
 Name:

 Address:
 2321 STAG RUN BLVD.
 Address:

 City-St-Zip:
 CLEARWATER, FL 33765
 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: MARY PANTON SD 06/24/2004