


2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Jan 28, 2004 08:00 AM
Secretary of State

DOCUMENT # N46813		
1. Entity Name THE BANKS FOUNDATION, INC.		
Principal Place of Business 1211 S. MILITARY TRAIL DEERFIELD BEACH, FL 33442-7632 US	Mailing Address 1211 S. MILITARY TRAIL DEERFIELD BEACH, FL 33442-7632 US	
DO NOT WRITE IN THIS SPACE		



01072004 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0308530	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BANKS, DAVID P 1211 S MILITARY TR SUITE 200 DEERFIELD, FL 33442	DO NOT WRITE IN THIS SPACE
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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 _____ (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

000000017059
01/28/04-80081-009 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BANKS, DAVID P. 1211 S MILITARY TRAIL DEERFIELD BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BANK, MALVIN E. 3900 SOCIETY CENTER, 127 PUBLIC SQUARE CLEVELAND, OH
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SPECTOR, MARTIN C. 4040 EMBASSY PKWY. AKRON, OH
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)(f), 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: *David P. Banks* DIRECTOR Date: 1/22/04 Davina Phone #: 954.480.2611