


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2005 8:00 am
Secretary of State

01-25-2005 90036 024 ****61.25

DOCUMENT # N49210
 1. Entity Name
JOSEPHINE S. LEISER FOUNDATION, INC.



Principal Place of Business C/O JAMES I. RIDLEY, ESQ. 1401 E. BROWARD BLVD., SUITE 200 FORT LAUDERDALE, FL 33301	Mailing Address C/O JAMES I. RIDLEY, ESQ. 1401 E. BROWARD BLVD., SUITE 200 FORT LAUDERDALE, FL 33301
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01032005 No Chg-NP CR2E037 (10/03)

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4. FEI Number 65-0347903	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
 RIDLEY, JAMES I ESQ.
 1401 E. BROWARD BLVD., SUITE 200
 FORT LAUDERDALE, FL 33301

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JUDD, ROBERT B ESQUIRE 500 E. BROWARD BLVD., SUITE 1400 FORT LAUDERDALE, FL 33394
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FRIEDT, THEODORE K 1431 S. OCEAN BLVD., VILLA 37 POMPANO BEACH, FL 33062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CS TURNER, JAMES BAXTER JR. 2801-306 Glenwood Gardens Lane Raleigh, NC 27602
TITLE NAME STREET ADDRESS CITY-ST-ZIP	IT BEARD, JOAN 2424 NE 48TH LANE FORT LAUDERDALE, FL 33308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify 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 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: Robert B. Judd President 1/19/05 (954) 462-2000
Signature and typed or printed name of signing officer or director Date Daytime Phone #

Robert B. Judd, President