


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 23, 2004 08:00 AM
Secretary of State

DOCUMENT # N92000000623 1. Entity Name FEDERATED CHARITIES, INC.	
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Principal Place of Business 4816 TAFT ST HOLLYWOOD FL 33021	Mailing Address 4816 TAFT ST HOLLYWOOD FL 33021
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MOORE CR2E037 (11/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State

Zip	Country	Zip	Country
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4. FEI Number 65-0379522	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent MALAVSKY, MORTON 4816 TAFT ST. HOLLYWOOD FL 33021

7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS													
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<table border="0" style="width: 100%;"> <tr> <td style="width: 80%;">D MALAVSKY, MORTON 4816 TAFT ST. HOLLYWOOD FL 33021</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>D BLUMENTHAL, FRED 4816 TAFT ST. HOLLYWOOD FL 33021</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>D SENICK, SYLVIA 4816 TAFT ST. HOLLYWOOD FL 33021</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>D AZULAY, Y. JUDD 35 S. WACKER DR. CHICAGO IL</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>D KURLAND, SHELDON 9853 PINES BLVD PEMBROKE PINES FL</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td> </td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> </table>	D MALAVSKY, MORTON 4816 TAFT ST. HOLLYWOOD FL 33021	<input type="checkbox"/> Delete	D BLUMENTHAL, FRED 4816 TAFT ST. HOLLYWOOD FL 33021	<input type="checkbox"/> Delete	D SENICK, SYLVIA 4816 TAFT ST. HOLLYWOOD FL 33021	<input type="checkbox"/> Delete	D AZULAY, Y. JUDD 35 S. WACKER DR. CHICAGO IL	<input type="checkbox"/> Delete	D KURLAND, SHELDON 9853 PINES BLVD PEMBROKE PINES FL	<input type="checkbox"/> Delete		<input type="checkbox"/> Delete
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10													
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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: Morton Malavsky - Morton Malavsky - 2/18/04 - 954-962-6222