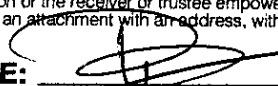


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90249 039 ****61.25

DOCUMENT # N92000000752 1. Entity Name CONNOR MORAN CHILDREN'S CANCER FOUNDATION, INC.			
Principal Place of Business 4400 N CONGRESS SUITE 110 W PALM BEACH, FL 33407 US		Mailing Address 4400 N CONGRESS SUITE 110 W PALM BEACH, FL 33407 US	
2. Principal Place of Business 825 US Hwy One Suite, Apt. #, etc. Suite 320 City & State Jupiter, FL Zip 33478 Country US		3. Mailing Address 825 US Hwy One Suite, Apt. #, etc. Suite 320 City & State Jupiter, FL Zip 33478 Country US	
			
		01212004 Chg-NP CR2E037 (10/03)	
		4. FEI Number 65-0374021	
		Applied For ☐ Not Applicable	
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GARRIS, CHARLES E. 817 BEACHLAND BLVD VERO BEACH, FL 32963		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	S SILVER, BRUCE ☒ Delete	TITLE	☐ Change ☐ Addition
NAME	11832 FOUNTAINSIDE CIRCLE	NAME	
STREET ADDRESS	BOYNTON BEACH, FL 33437	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	PD FONG, HENRY ☐ Delete	TITLE	☒ Change ☐ Addition
NAME	2401 PGA BLVD STE 280F	NAME	500 Australian Ave S. #625
STREET ADDRESS	WPB, FL 33410	STREET ADDRESS	West Palm Bch, FL 33401
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	V VASTOLA, JEFF ☒ Delete	TITLE	☐ Change ☐ Addition
NAME	1 CLEARLAKE CENTER STE 1550	NAME	
STREET ADDRESS	WEST PALM BEACH, FL 33401	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	ED MORAN, TERI ☐ Delete	TITLE	☒ Change ☐ Addition
NAME	4400 N. CONGRESS STE 110	NAME	19224 Country Club Dr
STREET ADDRESS	WEST PALM BEACH, FL 33407	STREET ADDRESS	Tegusta, FL 33469
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	T CHARNEV, BERNIE ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	11107 OAKDALE RD	NAME	
STREET ADDRESS	BOYNTON BEACH, FL 33437	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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: 		TERI MORAN 4/22/04 561-741-1144	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	