2004 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

1. Entity Name

DOCUMENT # N96000003632



04-05-2004 90004 006 ****61.25

Apr 05, 2004 8:00 am Secretary of State

FILED

CONGRE	GATION FOR HUMANISTIC								
4370 S. TAMIAMI TRAIL 4370 SUITE 314 SUIT		Mailing Address 4370 S. TAMIAMI TRAIL SUITE 314 SARASOTA, FL 34231	370 S. TAMIAMI TRAIL UITE 314		7 2 0 6 3 7 5 7 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6				
2. Principal Place of Business 3. Ma		3. Mailing Address	Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		1 Chg-NP	CR2E037	7 (10/03)		
City & State		City & State	City & State		nber 574358	, <u>, , ,</u>		olied For Applicable	
Zip	Country	Ζp	Country	5. Certifica	ite of Status Desired		8.75 Add ee Required		
	6. Name and Address of Current R	egistered Agent	T T	7. Name a	nd Address of New I	Registered A	gent		
			Name						
HARRIS, WAYNE T.JR — 7642 49TH AVENUE EAST BRADENTON, FL 34203				Street Address (P.O. Box Number is Not Acceptable)					
			City			FL	Zip Code	,	
	named entity submits this statement for ions of registered agent. Signature, typed or printed name of registered agent ar		-	registered agent, or		lorida. Lam fa DATE	arrillian with,	and accept	
	Filing Fee is \$61.25 Due by May 1, 2004	9. Election Carr Trust Fund C	npaign Financing contribution.	\$5.00 Ma Added to Fe	100000000000000000000000000000000000000	Make check rida Departr			
10.	OFFICERS AND DIRE	ECTORS	11.	ADDITIONS/0	CHANGES TO OFFICE	ERS AND DIR	ECTORS IN	10	
NAME STREET ADDRESS CRTY-ST-ZIP	PD WILLCHER, TOBI 3639 MUIRFIELD DR SARASOTA, FL 34238	🗀 Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PEARLMAN, ARLENE 2755 HORSESHOE CT. SARASOTA, FL 34235	Delete	TITLE NAME STRUCT ADDRESS CITY-ST-ZIP				Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FREEMAN, NORMAN 2427 ASPINWALL ST. SARASOTA, FL 34237	Delete	THE NAME STREET ADDRESS CITY-ST-ZIP		,		Change	Addition	
NAME STREET ADDRESS CHY-SI-ZIP	TD HARRIS, WAYNE T JR 7642 49TH AVE., E. BRADENTON, FL 34203	☐ Delete	TITLE NAME STREET ADDRESS CHY-SI-ZIP				Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MICHELMAN, CAROL 37 SUNSET DR. APT. 23 SARASOTA, FL. 34236	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	;			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BORNSTEN, DONALD 7111 PRESTWICK CT. UNIVERSITY PARK, FL 34201	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZP	BORNSTA	EIN, DONA		Change	Addition	

12. It 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT