


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90449 049 ****70.00

DOCUMENT # N97000003381	
1. Entity Name INTER-CITY UPBEAT, INC.	

Principal Place of Business 1897 PALM BEACH LAKES BLVD. 221 WEST PALM BEACH, FL 33409	Mailing Address 931 VILLAGE BLVD. 905-PMB83 WEST PALM BEACH, FL 33409 US
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DO NOT WRITE IN THIS SPACE



04212004 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0763401	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TIPTON, TOMMY
 1897 PALM BEACH LAKES BLVD.
 221
 WEST PALM BEACH, FL 33409

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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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, SUSAN 151 SARATOGA BLVD WEST ROYAL PALM BEACH, FL 33411
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TIPTON, TOMMY 501 S. CONGRESS AVE. WEST PALM BEACH, FL 33409
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WATFORD, ROBERT 1233 45TH STREET WEST PALM BEACH, FL 33407
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HIGHTOWER, KHALIYAH 401 WEDGEWOOD PLAZA DR. WEST PALM BEACH, FL 33404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RUSSELL, LATANYA 1447 PALM BEACH LAKES BLVD WEST PALM BEACH, FL 33401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, JONATHAN 1233 45TH STREET WEST PALM BEACH, FL 33407

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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 an other like empowered.

SIGNATURE:  **Tommy TIPTON** 4/21/04 561-686-8598

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #