

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 08:00 AM
Secretary of State

DOCUMENT # P29812

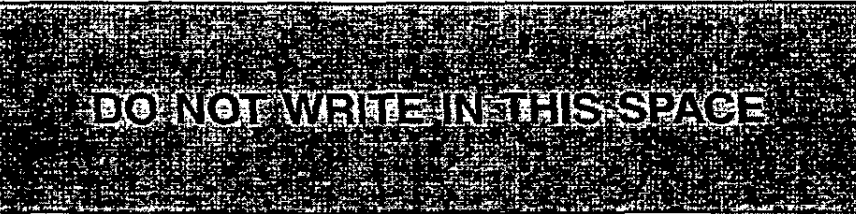
1. Entity Name
FREEDOM FROM HUNGER FOUNDATION, INC.



Principal Place of Business 1644 DAVINCI CT P.O. BOX 2000 DAVIS, CA 95616 US	Mailing Address P. O. BOX 2000 DAVIS, CA 95617 US
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01072004 No Chg-NP CR2E037 (10/03)



4. FEI Number 95-1647835	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**DUNFORD, JAMES M.
 5510 RIGEL COURT
 ATLANTIC BEACH, FL 32233-4581**



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)

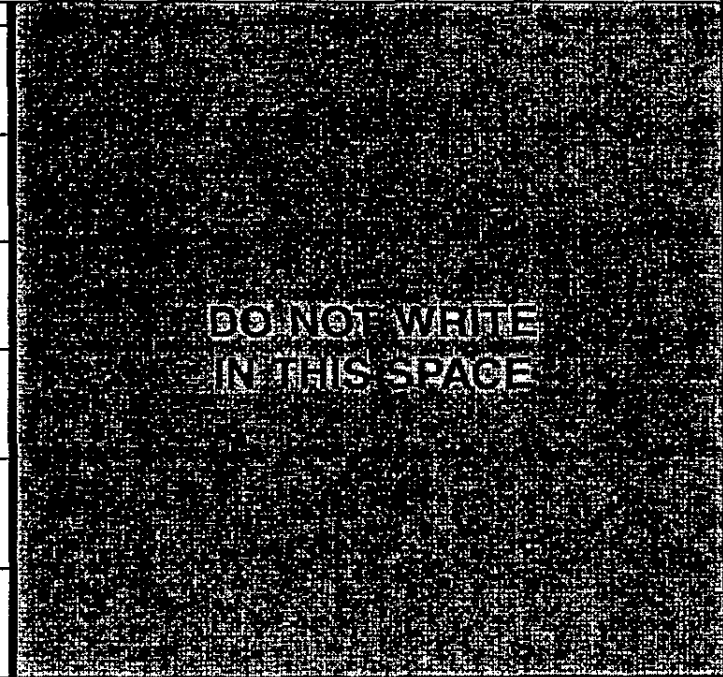
**Filing Fee is \$61.25
 Due by May 1, 2004**

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

U00000111082
 2004-80108-D15 70.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DUNFORD, CHRISTOPHER 1844 DAVINCI COURT DAVIS, CA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD WASSON, WELDON H DAVINCI CT DAVIS, CA 95618
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MOORE, CHARLES V 1644 DAVINCI CT DAVIS, CA 95618
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CHESTON, SHEILA C 1644 DAVINCI CT DAVIS, CA 95618
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V VOR DER BRUEGGE, ELLEN 1644 DAVINCI COURT DAVIS, CA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCBURNEY, THOMAS R 1644 DAVINCI CT. DAVIS, CA 95618



12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Jean E. Dickey **Jean E. Dickey** 1/8/04 (530) 758-6200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #