

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

FILED
Mar 08, 2004 8:00 am
Secretary of State

03-08-2004 90027 016 ****70.00

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1. Entity Name

**ATAXIA TELANGIECTASIA CHILDREN'S PROJECT,
INC.**

Principal Place of Business

**668 SOUTH MILITARY TRAIL
DEERFIELD BEACH FL 33442
US**

Mailing Address

**668 SOUTH MILITARY TRAIL
DEERFIELD BEACH FL 33442
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

MOORE

CR2E037 (11/03)

4. FEI Number

65-0427215

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MARGUS, BRADLEY A
21645 CARTAGENA DRIVE
BOCA RATON FL 33428**

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

Signature, typed or printed name of registered agent and title if applicable.

(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
**D
DONOGHUE, MICHAEL
765 HOLLOW TREE RIDGE ROAD
DARIEN CT 06820** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MADISON, AMY
1505 RED OAK COVE
SCHERTZ TX 78154** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MARGUS, ALBERT F JR
621 SOUTHWEST MAYPOP COURT
BOCA RATON FL 33486** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MIDDLEBROOK, ROB
34 POWDER HILL RD.
BEDFORD NH 03110** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
JEHLIK, GREG
23 ELIOT HILL RD
NATICK MA 01760** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MARGUS, BRADLEY A
21645 CARTAGENA DRIVE
BOCA RATON FL 33428** ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bradley A. Margus, President

3/1/04

Date

954-481-6611

Daytime Phone #