2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004
Secretary of State

DOCUMENT# N94000003412

Entity Name: ALPHA/OMEGA CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

505 S FLAGLER DRIVE
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 658
31 BROOKSIDE DR
GREENWICH, CT 06836 US

New Mailing Address:

P. O. BOX 3475
WEST PALM BEACH, FL 334023475 US

FEI Number: 65-0510147 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DE LESSEPS, TAUNI
505 S FLAGLER DRIVE
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

ALEXANDER, LARRY B
505 S FLAGLER DRIVE
WEST PALM BEACH, FL 33401 US

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.

SIGNATURE: LARRY B ALEXANDER 04/12/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VD ( ) Delete
Name: KEEFE, ANITA DE LESSE
Address: AIKEN ROAD
City-St-Zip: GREENWICH, CT 06831

Title: PD ( ) Delete
Name: GILBRIDE, FRANK J II
Address: 505 S. FLAGLER DR. #1100
City-St-Zip: WEST PALM BEACH, FL 334023475

Title: D ( ) Delete
Name: ALEXANDER, LARRY B
Address: 1515 S. FLAGLER DR. #2301
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D ( ) Delete
Name: BOOKER, FLETCHER T
Address: 452 WORTH AVENUE
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY B. ALEXANDER D 04/12/2004
Electronic Signature of Signing Officer or Director Date