

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04403

FILED
Apr 15, 2004
Secretary of State**Entity Name:** THE FRIENDS OF THE HEPBURN CENTER INCORPORATED**Current Principal Place of Business:**750 N.W. 8TH AVE.
HALLANDALE, FL 33009 US**New Principal Place of Business:****Current Mailing Address:**ARMIN LOVENVIRTH
1995 EAST HALLANDALE BEACH BLVD.
HALLANDALE BEACH, FL 33009**New Mailing Address:****FEI Number:** 59-2710007**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LOVENVIRTH, ARMIN
1995 EAST HALLANDALE BEACH BLVD.
HALLANDALE BEACH, FL 33009 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: LOVENVIRTH, ARMIN
Address: 1995 EAST HALLANDALE BEACH BLVD.
City-St-Zip: HALLANDALE BEACH, FL 33009 US

Title: DS () Delete
Name: PENTACOST, JACQUELINE
Address: 2001 ATLANTIC SHORES BLVD
City-St-Zip: HALLANDALE BEACH, FL 33009 US

Title: D () Delete
Name: QUINN, JAMES
Address: 542 BLUE HERON DRIVE
City-St-Zip: HALLANDALE BEACH, FL 33009 US

Title: D () Delete
Name: HAVIER, HARRIET
Address: 810 N.E. 12TH AVE.
City-St-Zip: HALLANDALE BEACH, FL 33009 US

Title: D () Delete
Name: HAMMOND, SANDRA
Address: 900 NE 12TH AVENUE, #304
City-St-Zip: HALLANDALE BEACH, FL 33009 US

Title: D () Delete
Name: MULCAHY, SEAN
Address: 123 NW 6TH AVENUE
City-St-Zip: HALLANDALE BEACH, FL 33009 US

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: D (X) Change () Addition
Name: SANDMAN, MICHAEL
Address: 1425 ATLANTIC SHORES BLVD
City-St-Zip: HALLANDALE BEACH, FL 33009 US

Title: D (X) Change () Addition
Name: WASHINGTON, MARY
Address: 700 NW 5TH COURT
City-St-Zip: HALLANDALE BEACH, FL 33009 US

Title: M (X) Change () Addition
Name: LADOLCETTA, PATRICIA
Address: 400 SOUTH FEDERAL HIGHWAY
City-St-Zip: HALLANDALE BEACH, FL 33009 US

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: PATRICIA LADOLCETTA

M

04/15/2004

Electronic Signature of Signing Officer or Director

Date