2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008541

Entity Name: BABY OTTER SCHOLARSHIP AND EDUCATION FUND, INC.

FILED Apr 20, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Ourient i inicipal i lace of Dusiness.	New I Interput I face of Dasiness

C/O FISHER LAWRENCE & MALOVE, P.A. 1125 NE 125TH ST SUITE 201

MIAMI, FL 33161

Current Mailing Address:

C/O FISHER LAWRENCE & MALOVE, P.A. 1125 NE 125TH ST SUITE 201

MIAMI, FL 33161

FEI Number: 42-1610189 FEI Number Applied For () New Mailing Address:

NORTH MIAMI, FL 33161

C/O FISHER LAWRENCE & MALOVE, P.A. 1125 NE 125TH ST SUITE 201 NORTH MIAMI, FL 33161

1125 NE 125TH ST SUITE 201

C/O FISHER LAWRENCE & MALOVE, P.A.

FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LAWRENCE, ROBERT A ESQ. FISHER LAWRENCE & MALOVE, P.A. 1125 NE 125TH ST SUITE 201 MIAMI, FL 33161 US

LAWRENCE, ROBERT A ESQ FISHER LAWRENCE & MALOVE, P.A. 1125 NE 125TH ST SUITE 201 NORTH MIAMI, FL 33161 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.

Name:

Address:

City-St-Zip:

SIGNATURE: Electronic Signature of Registered Agent 04/20/2004 Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition

PTD () Delete BLOOM, MARLENE Name: Address:

2501 MARINA BAY DR #201 City-St-Zip: FT LAUDERDALE, FL 33312

Title: VSD () Delete

Name: YORK, MINDY

Address: 1125 NE 125TH ST SUITE 201

City-St-Zip: MIAMI, FL 33161

Title: () Delete LAWRENCE, ROBERT Name: 1125 NE 125TH ST SUITE 201 Address:

City-St-Zip: MIAMI, FL 33161 Title: VSD (X) Change () Addition

Name: YORK, MINDY

Address: 1125 NE 125TH ST SUITE 201 City-St-Zip: NORTH MIAMI, FL 33161

Title: (X) Change () Addition

LAWRENCE, ROBERT Name: 1125 NE 125TH ST SUITE 201 Address: City-St-Zip: NORTH MIAMI, FL 33161

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: ROBERT A LAWRENCE D 04/20/2004