

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005678

FILED
Jun 30, 2004
Secretary of State**Entity Name:** BE STILL AND KNOW, INC.**Current Principal Place of Business:**13727 SW 152 STREET #319
MIAMI, FL 33177**New Principal Place of Business:****Current Mailing Address:**13727 SW 152 STREET #319
MIAMI, FL 33177**New Mailing Address:****FEI Number:** 95-4687543**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**FORD, TOMMY
13727 SW 152 ST #319
MIAMI, FL 33177 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:** PCSD () Delete
Name: FORD, TOMMY
Address: 13727 SW 152 ST #319
City-St-Zip: MIAMI, FL**Title:** D () Delete
Name: SASSO-FORD, GINA
Address: 13727 SW 152 ST #319
City-St-Zip: MIAMI, FL**Title:** CFOT () Delete
Name: JOHNSON, DANNY
Address: 13015 SW 89TH PLACE #303
City-St-Zip: MIAMI, FL 33176**Title:** VC () Delete
Name: MOURNING, TRACY
Address: 3525 ANCHORAGE WAY
City-St-Zip: MIAMI, FL 33133**Title:** D () Delete
Name: CARPENTER, WILLIE
Address: 10965 SW 175 ST
City-St-Zip: MIAMI, FL 33157**Title:** D (X) Delete
Name: ABRAHAM, NORMA J
Address: 4891 SW 76 ST
City-St-Zip: MIAMI, FL 33143**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: CARPENTER, WILLIE
Address: 10965 SW 175 STREET
City-St-Zip: MIAMI, FL 33157**Title:** D (X) Change () Addition
Name: ABRAHAM, NORMA J
Address: 4891 SW 76TH STREET
City-St-Zip: MIAMI, FL 33143**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: GINA FORD

D

06/30/2004

Electronic Signature of Signing Officer or Director

Date