2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# 707174

Entity Name: SOUTH BROWARD CRADLE NURSERY, INC.

Current Principal Place of Business:

2203 DOUGLAS STREET
HOLLYWOOD, FL 33020

New Principal Place of Business:

Current Mailing Address:

2203 DOUGLAS STREET
HOLLYWOOD, FL 33020

New Mailing Address:

FEI Number: 59-1055886 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARRIS, ALBERT JR
2203 DOUGLAS ST
HOLLYWOOD, FL 33020 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: CEOD ( ) Delete
Name: HARRIS, JR ELBERT L
Address: 2203 DOUGLAS STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: VD ( ) Delete
Name: ROBINSON, RICHARD
Address: 2203 DOUGLAS STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: ST ( ) Delete
Name: MUNNERLYN, PAULA,
Address: 2203 DOUGLAS STREET
City-St-Zip: HOLLYWOOD, FL 00000,

Title: T ( ) Delete
Name: MUNNERLYN, GERALDINE
Address: 2203 DOUGLAS STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: AS ( ) Delete
Name: MATHIS, NORMA
Address: 2203 DOUGLAS STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: FS ( ) Delete
Name: COUNCIL, AUBRY
Address: 2203 DOUGLAS STREET
City-St-Zip: HOLLYWOOD, FL

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:

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: REV.ELBERT L. HARRIS JR. CEO 04/30/2004

Electronic Signature of Signing Officer or Director — Date