

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709402

Entity Name: SOUTH FLORIDA BLOOD BANKS, INC.

FILED  
Apr 13, 2004  
Secretary of State

## Current Principal Place of Business:

3451 NORTHLAKE BLVD  
LAKE PARK, FL 33403

## New Principal Place of Business:

## Current Mailing Address:

3451 NORTHLAKE BLVD  
LAKE PARK, FL 33403

## New Mailing Address:

FEI Number: 59-0877825      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

FLYNN, JOHN H  
3451 NORTHLAKE BLVD  
LAKE PARK, FL 33403

## Name and Address of New Registered Agent:

FLYNN, JOHN H  
3451 NORTHLAKE BLVD  
LAKE PARK, FL 33403      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: \_\_\_\_\_

04/13/2004

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: CP      ( ) Delete  
Name: SOUTH, LAURA  
Address: 3451 NORTHLAKE BLVD  
City-St-Zip: LAKE PARK, FL 33403

Title: VD      ( ) Delete  
Name: REEVER, TIM  
Address: 3451 NORTHLAKE BLVD  
City-St-Zip: LAKE PARK, FL 33403

Title: D      ( ) Delete  
Name: EASSA, MICHELE  
Address: 3451 NORTHLAKE BLVD  
City-St-Zip: LAKE PARK, FL 33403

Title: D      ( ) Delete  
Name: CHOURIS, VICKI  
Address: 3451 NORTHLAKE BLVD  
City-St-Zip: LAKE PARK, FL 33403

Title: D      ( ) Delete  
Name: WRIGHT, COLIN  
Address: 3451 NORTHLAKE BLVD  
City-St-Zip: LAKE PARK, FL 33403

Title: D      (X) Delete  
Name: REEVER, TIM  
Address: 933 45TH STREET  
City-St-Zip: WEST PALM BEACH, FL 33407

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C/D      (X) Change ( ) Addition  
Name: WRIGHT, COLIN M  
Address: 3451 NORTHLAKE BLVD  
City-St-Zip: LAKE PARK, FL 33403

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: P      (X) Change ( ) Addition  
Name: FLYNN, JOHN H  
Address: 3451 NORTHLAKE BLVD  
City-St-Zip: LAKE PARK, FL 33403

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: JOHN H. FLYNN

P

04/13/2004

Electronic Signature of Signing Officer or Director

Date