

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 22, 2004  
Secretary of State**

DOCUMENT# 711361

Entity Name: THE ALLEN MORRIS FOUNDATION

**Current Principal Place of Business:**

121 ALHAMBRA PLAZA  
PENTHOUSE I, SUITE 1600  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

121 ALHAMBRA PLAZA  
PENTHOUSE I, SUITE 1600  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 59-6152420      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MORRIS, W. ALLEN  
121 ALHAMBRA PLAZA  
PENTHOUSE I, SUITE 1600  
CORAL GABLES, FL 33134

**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: PD ( ) Delete  
Name: MORRIS, W. ALLEN  
Address: 121 ALHAMBRA PLAZA, PH I, SUITE 1600  
City-St-Zip: CORAL GABLES, FL 33134

Title: DV ( ) Delete  
Name: MORRIS, DIANE Y  
Address: 121 ALHAMBRA PLAZA, PH I, SUITE 1600  
City-St-Zip: CORAL GABLES, FL 33134

Title: DV ( ) Delete  
Name: RUPP, KATHRYN M  
Address: 121 ALHAMBRA PLAZA, PH I, SUITE 1600  
City-St-Zip: CORAL GABLES, FL 33134

Title: DV ( ) Delete  
Name: BELL, JAMES F JR.  
Address: 1160 JOHNSON FERRY ROAD  
City-St-Zip: ATLANTA, GA 30319

Title: DV ( ) Delete  
Name: BELL, IDA M  
Address: 1160 JOHNSON FERRY ROAD  
City-St-Zip: ATLANTA, GA 30319

Title: D ( ) Delete  
Name: COLLINS, DIANE C  
Address: 121 ALHAMBRA PLAZA, PH I, SUITE 1600  
City-St-Zip: CORAL GABLES, FL 33134

**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: M (X) Change ( ) Addition  
Name: COLLINS, DIANE C  
Address: 121 ALHAMBRA PLAZA, PH I, SUITE 1600  
City-St-Zip: CORAL GABLES, FL 33134

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 M. HUNTER

S

01/22/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date

GIL, YAZMIN (T)  
121 ALHAMBRA PLAZA, SUITE 1600  
CORAL GABLES, FL 33134

HUNTER, ROBERT M. (S)  
121 ALHAMBRA PLAZA, PH I, SUITE 1600  
CORAL GABLES, FL 33134

MORRIS, IDA A. (D)  
121 ALHAMBRA PLAZA, PH I, SUITE 1600  
CORAL GABLES, FL 33134