2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#756683

FILED Jan 13, 2004 Secretary of State

Entity Name: BIG BROTHERS/BIG SISTERS OF PALM BEACH COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business: 2112 CONGRESS AVE SOUTH SUITE 200 WEST PALM BEACH, FL 33406 US **New Mailing Address: Current Mailing Address:** 2112 CONGRESS AVE SOUTH SUITE 200 WEST PALM BEACH, FL 33406 US FEI Number: 59-2078576 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CALLAGHAN, ELIZABETH 3851 NORTH OCEAN BLVD CONDO # 115 GULFSTREAM, FL 33483 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CALLAGHAN, ELIZABETH Name: Name: 3851 NORTH OCEAN BLVD CONDO # 115 Address: Address: City-St-Zip: GULFSTREAM, FL 33483 City-St-Zip: Title: () Delete Title: () Change () Addition DUNRAY, MARY Name: Name: Address: 5770 E COACH HOUSE CIRCLE Address: City-St-Zip: BOCA RATON, FL 33468 City-St-Zip: Title: **PRES** () Delete Title: PRES (X) Change () Addition HENDERSON, DONALD SLEUMAN, NANCY Name: Name: Address: 7046 NW 70TH TERRACE Address: 7830 NILE RIVER ROAD City-St-Zip: PARKLAND, FL 33067 City-St-Zip: WEST PALM BEACH, FL 33411 (X) Change () Addition Title: SECD () Delete Title: SECD MCLAUGHLIN, DIANE Name: Name: DAVID, GREENE Address: 119 WESTMINISTER ROAD Address: 149 NW 70TH STREET #306 City-St-Zip: WEST PALM BEACH, FL 33405 City-St-Zip: BOCA RATON, FL 33487 Title: 1VPD () Delete Title: 1VPD (X) Change () Addition SLEUMAN, NANCY MCLAUGHLIN, DIANE Name: Name: 7830 NILE RIVER ROAD 119 WESTMINISTER ROAD Address: Address: City-St-Zip: WEST PALM BEACH, FL 33411 City-St-Zip: WEST PALM BEACH, FL 33405 Title: () Delete Title: () Change () Addition POWELL JOHN Name: Name: Address: 15780 CYPRESS CHASE LANE Address: WELLINGTON, FL 33414 City-St-Zip: 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: NANCY SLEUMAN NS 01/13/2004