2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2004
Secretary of State

DOCUMENT# 763537

Entity Name: THE JOANNA KENNON NORIEGA CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

1001 HARDEE ROAD
CORAL GABLES, FL 33146 US

New Principal Place of Business:

Current Mailing Address:

1001 HARDEE ROAD
CORAL GABLES, FL 33146 US

New Mailing Address:

FEI Number: 59-2314988 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAMARJ NORIEGA
1001 HARDEE ROAD
CORAL GABLES, FL 33146

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: SPT ( ) Delete
Name: NORIEGA, LAMAR J,
Address: 1001 HARDEE ROAD
City-St-Zip: CORAL GABLES, FL

Title: D ( ) Delete
Name: NORIEGA, LAMAR J,
Address: 1001 HARDEE ROAD
City-St-Zip: CORAL GABLES, FL

Title: VD ( ) Delete
Name: JERNIGAN, NELL T.,
Address: 3115 E WOOD VALLEY RD NW
City-St-Zip: ATLANTA, GA

Title: D ( ) Delete
Name: VESSER, MEGAN N
Address: 1013 GLENSPRINGS DRIVE
City-St-Zip: KNOXVILLE, TN 37922

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:

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: LAMAR J. NORIEGA SPT 04/08/2004

Electronic Signature of Signing Officer or Director Date