2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2004
Secretary of State

DOCUMENT# 766061

Entity Name: SOUTHEAST CANCER RESEARCH FOUNDATION OF FLORIDA, INC.

Current Principal Place of Business:

P.O. BOX 2491
WEST PALM BEACH, FL 33402

New Principal Place of Business:

P.O. BOX 921
PALM BEACH, FL 33480 US

Current Mailing Address:

P.O. BOX 2491
WEST PALM BEACH, FL 33402

New Mailing Address:

P.O. BOX 921
PALM BEACH, FL 33480 US

FEI Number: 59-2541781 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FALLORETTA, MARIE
7544 NEMEC DR. N
LAKE CLARKE SHORES, FL 33406 US

Name and Address of New Registered Agent:

JACOBSON, ROBERT J TD
273 SANFORD AVENUE
PALM BEACH, FL 33480 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: ROBERT J. JACOBSON, M.D. 04/09/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: HARRIS, JAMES N., MD,
Address: 303 PENDELTON LN.
City-St-Zip: PALM BEACH, FL

Title: SD ( ) Delete
Name: MCKEEN,ELISABETH A.,
Address: 13 MARLOOD LN
City-St-Zip: PALM BEACH GARDENS, FL

Title: TD ( ) Delete
Name: HARRIS, JOAN,
Address: 303 PENDELTON LN.
City-St-Zip: PALM BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: HARRIS, JAMES M M.D.
Address: 303 PENDELTON LN.
City-St-Zip: PALM BEACH, FL 33480 US

Title: SD (X) Change ( ) Addition
Name: MCKEEN, ELISABETH A M.D.
Address: 7 GLENCAIRN ROAD
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: TD (X) Change ( ) Addition
Name: JACOBSON, ROBERT J M.D.
Address: 273 SANFORD AVENUE
City-St-Zip: PALM BEACH, FL 33480 US

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 J. JACOBSON, M.D. TD 04/09/2004
Electronic Signature of Signing Officer or Director Date