


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 31, 2004 8:00 am
Secretary of State

03-31-2004 90047 009 ****61.25

DOCUMENT # 770763	
1. Entity Name PALM BEACH COUNTY JUVENILE ASSOCIATION, INC.	

Principal Place of Business JUVENILE ASSESSMENT CENTER 3400 BELVEDERE RD WEST PALM BEACH FL 33406 US	Mailing Address P O BOX 3592 WEST PALM BEACH FL 33402-3592 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



MOORE CR2E037 (11/03)

4. FEI Number 59-2422001		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		

6. Name and Address of Current Registered Agent VANWAGONER, MIKE 2112 S CONGRESS AVENUE SUITE 102 WEST PALM BEACH FL 33406		7. Name and Address of New Registered Agent Name Raasch, Andrea Street Address (P.O. Box Number is Not Acceptable) 471 Spencer Drive City West Palm Beach FL Zip Code 33409	
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Andrea Raasch **ANDREA RAASCH** DATE 3/17/04

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25 Due By May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FAZIO, GINA 11382 PROSPERITY FARMS RD STE 228B PALM BEACH GARDENS FL 33410 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Powell, Elise PO Box 3588 Lantana, Florida 33465-3588 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V THIBADEAU, JODI SLATER 6416 MELALEUCA LN GREENACRES FL 33463 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Nowakowski, Eva 2001 Palm Beach Lakes Blvd., S 300-C West Palm Beach, Florida 33409 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NELSON, DEBRA 3330 FOREST HILL BLVD WEST PALM BEACH FL 33406 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VanWagoner, Mike 2112 S Congress Avenue, S 102 West Palm Beach, Florida 33406 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD POWELL, ELISE PO BOX 3588 LANTANA FL 33465-3588 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Tarlow, Sharon 2201 45th Street West Palm Beach, Florida 33407 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SHULMAN, CYNTHIA 2201 45TH ST WEST PALM BEACH FL 33407 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Anderson, Lauren 3111 S Dixie Highway, S 200 West Palm Beach, Florida 33405 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TARLOW, SHARON 2201 45TH ST WEST PALM BEACH FL 33407 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Feliciano, Juan 5115 47th Place North West Palm Beach, Florida 33417 <input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Sharon M. Tarlow **Sharon M. Tarlow** Date 3-17-04 (561) 881-2622

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR