# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

# **DOCUMENT#815663**

FILED Jan 07, 2004 Secretary of State

Entity Name: PARENTS WITHOUT PARTNERS, INC.

Current Principal Place of Business: New Principal Place of Business:

1650 S DIXIE HWY SUITE 510

BOCA RATON, FL 334327461 US

Current Mailing Address: New Mailing Address:

729 EAST PRATT STREET 7TH FLOOR-SC ARLETT PLACE BALTIMORE, MD 21202 US

FEI Number: 13-5663691 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:

UNITED STATES CORPORATION COMPANY 1201 HAYS STREET STE. 105 TALLAHASSEE, FL 32301 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:

Fleshania Cianahana of Davistana d Anarah

## Electronic Signature of Registered Agent

#### Date

#### **OFFICERS AND DIRECTORS:**

VPD

JOHNSON, JO

2465 BEECH ST

CUYAHOGA FALLS, OH

(X) Delete

Title:

Title:

Name:

Address:

City-St-Zip:

### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete PAT BOYD. WELLER, MARIE PRESIDE Name: Name: 401 N MICHIGAN AVE Address: 87 ASHWICK DRIVE Address: City-St-Zip: CHICAGO, IL 60611 City-St-Zip: TORONTO, ONTARIO, CA M1K2L1 Title: ( ) Delete Title: (X) Change ( ) Addition KEN WARD, Name: LEIERZAPF, ROBERT TREASUR Name: Address: 401 N MICHIGAN AVE Address: 333 CONGRESS ALLEY City-St-Zip: CHICAGO, IL 60611 City-St-Zip: CARNEGIE, PA 15106 Title: () Delete Title: (X) Change ( ) Addition GEORGIA FRADY, TOUSEY, BOB VICE PR Name: Name: 401 N MICHIGAN AVE 3133 H NORMANDY WOOD DRIVE Address: Address: City-St-Zip: CHICAGO, IL 60611 City-St-Zip: ELLICOTT CITY, MD 21043 Title: SD () Delete Title: (X) Change ( ) Addition ROSENBERG, SUE SECRETA Name: MALLETT, CONNIE Name: 22746 CORTES DR Address: Address: 2847 CARAMBOLA CIRCLE SOUTH City-St-Zip: NOVI, MI City-St-Zip: COCONUT CREEK, FL 33066

Title: ( ) Change ( ) Addition

Name: Address: City-St-Zip:

/PD (X) Delete Title: ( ) Change ( ) Addition

 Name:
 FOY, JUDYE
 Name:

 Address:
 1309 MARIA DR
 Address:

 City-St-Zip:
 SULPHER, LA
 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: MARIE WELLER P 01/07/2004