

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Aug 30, 2004  
Secretary of State**

DOCUMENT# F00000006115

Entity Name: JUDICIAL WATCH, INC.

**Current Principal Place of Business:**

501 SCHOOL STREET S.W., SUITE 700  
WASHINGTON, DC 20024

**New Principal Place of Business:**

501 SCHOOL STREET S.W., SUITE 500  
WASHINGTON, DC 20024

**Current Mailing Address:**

501 SCHOOL STREET S.W., SUITE 700  
WASHINGTON, DC 20024

**New Mailing Address:**

501 SCHOOL STREET S.W., SUITE 500  
WASHINGTON, DC 20024

FEI Number: 52-1885088

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**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: P ( ) Delete  
Name: FITTON, THOMAS J  
Address: 501 SCHOOL STREET S.W., SUITE 700  
City-St-Zip: WASHINGTON, DC 20024

Title: S ( ) Delete  
Name: ORFANEDES, PAUL J  
Address: 501 SCHOOL STREET S.W., SUITE 700  
City-St-Zip: WASHINGTON, DC 20024

Title: D ( ) Delete  
Name: FARRELL, CHRIS  
Address: 501 SCHOOL STREET S.W., SUITE 700  
City-St-Zip: WASHINGTON, DC 20024

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: FITTON, THOMAS J  
Address: 501 SCHOOL STREET S.W., SUITE 500  
City-St-Zip: WASHINGTON, DC 20024

Title: S (X) Change ( ) Addition  
Name: ORFANEDES, PAUL J  
Address: 501 SCHOOL STREET S.W., SUITE 500  
City-St-Zip: WASHINGTON, DC 20024

Title: D (X) Change ( ) Addition  
Name: FARRELL, CHRIS  
Address: 501 SCHOOL STREET S.W., SUITE 500  
City-St-Zip: WASHINGTON, DC 20024

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: THOMAS FITTON

P

08/30/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date