

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002776

FILED
Apr 29, 2004
Secretary of State**Entity Name:** BRIDGE-LOGOS INTERNATIONAL TRUST, INC.**Current Principal Place of Business:**17310 NW 32 AVE
NEWBERRY, FL 32669**New Principal Place of Business:****Current Mailing Address:**PO BOX 141630
GAINESVILLE, FL 326141630**New Mailing Address:****FEI Number:** 22-3622339**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MORRELL, GUY
17310 NW 32 AVE
NEWBERRY, FL 32669 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:** PCD () Delete
Name: MORRELL, GUY J
Address: 17130 NW 32 AVE
City-St-Zip: NEWBERRY, FL 32669**Title:** SD () Delete
Name: TOMAN, SUZANNE
Address: 17130 NW 32 AVE
City-St-Zip: NEWBERRY, FL 32669**Title:** TD () Delete
Name: TOMAN, ANDREW
Address: 17130 NW 32 AVE
City-St-Zip: NEWBERRY, FL**Title:** D () Delete
Name: MORRELL, CATHERINE F
Address: 17130 NW 32 AVE
City-St-Zip: NEWBERRY, FL**Title:** VD () Delete
Name: WATSON, DENNIS G
Address: 398 LAKE INDIAN HILLS DRIVE
City-St-Zip: CARBONDALE, IL 62902**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:
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City-St-Zip:**Title:** () Change () Addition
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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: GUY J MORRELL

PCD

04/29/2004

Electronic Signature of Signing Officer or Director_____
Date