

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

FILED
Jul 19, 2004 08:00 AM
Secretary of State

DOCUMENT # F03000001485

1. Entity Name

**THE BENJAMIN W. AND MARION B. ROTH FOUNDATION
INCORPORATED**



Principal Place of Business

**501 EAST CAMINO REAL VILLA
BOCA RATON, FL 33432**

Mailing Address

**501 EAST CAMINO REAL VILLA
BOCA RATON, FL 33432**



07062004 No Chg-NP

CR2E037 (10/03)

4. FEI Number

30-0001592

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**ROTH, BENJAMIN W
501 EAST CAMINO REAL VILLA
BOCA RATON, FL 33432**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 8, 2004**

**9. Election Campaign Financing
Trust Fund Contribution.**



**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

**TITLE CPT
NAME ROTH, BENJAMIN W
STREET ADDRESS 501 EAST CAMINO REAL VILLA
CITY - ST - ZIP BOCA RATON, FL 33432**

**TITLE VCS
NAME ROTH, MARION
STREET ADDRESS 501 EAST CAMINO REAL VILLA
CITY - ST - ZIP BOCA RATON, FL 33432**

**TITLE D
NAME ROTH, JONATHAN D
STREET ADDRESS 501 EAST CAMINO REAL VILLA
CITY - ST - ZIP BOCA RATON, FL 33432**

**TITLE D
NAME ROTH, RICHARD G
STREET ADDRESS 501 EAST CAMINO REAL VILLA
CITY - ST - ZIP BOCA RATON, FL 33432**

**TITLE D
NAME ROTH, AMY R
STREET ADDRESS 501 EAST CAMINO REAL VILLA
CITY - ST - ZIP BOCA RATON, FL 33432**

**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**

1107000167295
07/19/04-80013-017 70.00

**DO NOT WRITE
IN THIS SPACE**

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:

Benjamin W. Roth

Benjamin W. Roth, Pres

7/13/04