2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2005
Secretary of State

DOCUMENT# F99000002613

Entity Name: MARGIE L. BROWN FAMILY FOUNDATION INC.

Current Principal Place of Business:

6253-B GRAYCLIFF DR
BOCA RATON, FL 33496

New Principal Place of Business:

6376 SAN MICHEL WAY
DELRAY BEACH, FL 33484

Current Mailing Address:

6253-B GRAYCLIFF DR
BOCA RATON, FL 33496

New Mailing Address:

6376 SAN MICHEL WAY
DELRAY BEACH, FL 33484

FEI Number: 42-1310957 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SIMON, MARGIE B
6253-B GRAYCLIFF DR
BOCA RATON, FL 33496 US

Name and Address of New Registered Agent:

SIMON, MARGIE B
6376 SAN MICHEL WAY
DELRAY BEACH, FL 33484 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: MARGIE B. SIMON 01/31/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PC ( ) Delete
Name: SIMON, MARGIE B
Address: 5219 ESTATES DRIVE
City-St-Zip: DELRAY BEACH, FL 33445

Title: VPD ( ) Delete
Name: BROWN, RONALD J
Address: 4110 BASSWOOD ROAD
City-St-Zip: ST. LOUIS PARK, MN 55416

Title: TD ( ) Delete
Name: ERENWORTH, JUDY P
Address: 403 WINDMERE DRIVE
City-St-Zip: PITTSBURGH, PA 15238

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC (X) Change ( ) Addition
Name: SIMON, MARGIE B
Address: 6376 SAN MICHEL WAY
City-St-Zip: DELRAY BEACH, FL 33484

Title: ( ) Change ( ) Addition
Name:
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: MARGIE B. SIMON P 01/31/2005
Electronic Signature of Signing Officer or Director Date