

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000301

FILED
Jan 09, 2004
Secretary of State**Entity Name:** THE FLORIDA SWAMPLANDS FOUNDATION, INC.**Current Principal Place of Business:**C/O WILSON SMITH, STEEL HECTOR & DAVIS
200 S. BISCAYNE BLVD., STE. 4000
MIAMI, FL 331312398**New Principal Place of Business:****Current Mailing Address:**C/O WILSON SMITH, STEEL HECTOR & DAVIS
200 S. BISCAYNE BLVD., STE. 4000
MIAMI, FL 331312398**New Mailing Address:****FEI Number:** 65-0976375 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SMITH, WILSON
200 S. BISCAYNE BLVD., STE. 4000
MIAMI, FL 33131 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:** D () Delete
Name: SMITH, WILSON
Address: 200 S. BISCAYNE BLVD., STE. 4000
City-St-Zip: MIAMI, FL 331312398**Title:** D () Delete
Name: MIRMAN, BEVERLY
Address: 14941 S.W. 238 ST.
City-St-Zip: MIAMI, FL 33111**Title:** D () Delete
Name: SMITH, JUDY
Address: 415 E. 11TH AVE.
City-St-Zip: WINFIELD, KS 67156**Title:** D () Delete
Name: MIRMAN, CHARLES
Address: 14941 S.W. 238 ST.
City-St-Zip: MIAMI, FL 33111**Title:** D () Delete
Name: LARSON, LORI
Address: 5213 S. CRESCENT DR.
City-St-Zip: TAMPA, FL 33611**Title:** D () Delete
Name: GOLDMAN, RICHARD
Address: 172 CAJEPUT DR.
City-St-Zip: NAPLES, FL 34108**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
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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: WILSON SMITH

PRES

01/09/2004

Electronic Signature of Signing Officer or Director_____
Date