## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000000438

FILED Mar 02, 2004 Secretary of State

Entity Name: THE DIGITAL BRIDGE LEARNING RESOURCE CENTER, INC.

Current Principal Place of Business: New Principal Place of Business:

1201 LENHAM CT. 2218 GREENHAVEN DRIVE SUN CITY CENTER, FL 33573 SUN CITY CENTER, FL 33573

Current Mailing Address: New Mailing Address:

1201 LENHAM CT. 2218 GREENHAVEN DRIVE SUN CITY CENTER, FL 33573 SUN CITY CENTER, FL 33573

FEI Number: 59-3621897 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

MOORE, BARBARA J
1201 LENHAM CT.
SUN CITY CENTER, FL 33573

MOORE, BARBARA J
2218 GREENHAVEN DRIVE
SUN CITY CENTER, FL 33573
SUN CITY CENTER, FL 33573

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: BARBARA J. MOORE 03/02/2004

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: MOORE, BARBARA J Name: MOORE, BARBARA J Address: 1209 LENHAM CT. Address: 2218 GREENHAVEN DRIVE City-St-Zip: SUN CITY CENTER, FL 33573 City-St-Zip: SUN CITY CENTER, FL 33573

Title: VD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GRIGGS, CATHERINE L
 Name:

 Address:
 1209 SABLE COVE
 Address:

 City-St-Zip:
 RUSKIN, FL 33570
 City-St-Zip:

Title: SD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 HARTZOG, DANIEL
 Name:

 Address:
 1209 SABLE COVE
 Address:

 City-St-Zip:
 RUSKIN, FL 33570
 City-St-Zip:

 $\label{eq:Title:Title:TD} \textit{Title:} \qquad \textit{TD} \qquad \textit{()} \; \textit{Delete} \qquad \qquad \textit{Title:} \qquad \textit{TD} \qquad \textit{(X)} \; \textit{Change ()} \; \textit{Addition}$ 

Name:MARSHALL, CHARLES WName:GRIGGS, GENEAddress:1201 LENHAM CT.Address:2218 GREENHAVEN DRIVECity-St-Zip:SUN CITY CENTER, FL 33573City-St-Zip:SUN CITY CENTER, FL 33573

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BIRCHMIRE, RICHARD
 Name:

 Address:
 1104 CHESTERFIELD
 Address:

 City-St-Zip:
 RUSKIN, FL 33573
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 WHITE, JAMES DR.
 Name:

 Address:
 4402 E. FOWLER AVE
 Address:

 City-St-Zip:
 TAMPA, FL 33620
 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: BARBARA J. MOORE PRES 03/02/2004