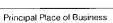
## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # N0000001017

THE FLORIDA TECHNOLOGICAL RESEARCH AND DEVELOPMENT FOUNDATION, INC.



TITUSVILLE, FL 32780

Mailing Address

5195 S. WASHINGTON AVE. 5195 S. WASHINGTON AVE. TITUSVILLE, FL 32780

DO NOT WRITE IN THIS SPACE



FILED

04 APR 16 AH 9:03

SECRETARY OF STATE TALLAHASSEE FLORIDA

66415707



04132004 No Chg-NP

CR2E037 (10/03)

4.	FEI Number	
	59-3655421	

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6.	Name	and	Address	of	Current	Registered	Agent

PETERS, MICHELLE 5195 S. WASHINGTON AVE. TITUSVILLE, FL 32780

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the tions of registered agent.	purpose of changing its registere	d office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept	
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 May 1, 2004	Election Campaign Financ Trust Fund Contribution.	eing	<b>\$5.00</b> May Be Added to Fees		
10.	OFFICERS AND DIRE	CTORS			<del></del>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD BROWER, RON 5195 S. WASHINGTON AVE. TITUSVILLE, FL 32780			4 84/3	100033798864 26/0401010001 **61.25	
TITLE NAME STREET AUDRESS CITY-ST-ZIP	VCD MCKAY, JESSE 9951 ATLANTIC BLVD. SUITE 120 JACKSONVILLE, FL 32225			0 // 1		
THILE NAME SIREET ADDRESS CITY-ST-ZIP	STD* - SPENCER, JUDY 712 FLORIDA AVENUE COCOA, FL 32922			DO	NOT WRITE	
NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
NAME STREET ADDRESS CITY - ST - ZIP					•	
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.						