2004 NOT-FOR-DROFIT

FILED Feb 23, 2004 8:00 am **Secretary of State**

 ANNUAL REPORT	JN

DOCUMENT # N0000001267 02-23-2004 90044 035 ****61.25 STONEWALL FOUNDATION, INC. Principal Place of Business Mailing Address 777 S HARBOR ISLAND BLVD 777 S HARBOR ISLAND BLVD 54009916 SUITE 760 **SUITE 760** TAMPA, FL 33602 TAMPA, FL 33602 2. Principal Place of Business 3. Mailing Address MALDILL AVE 700 S. MacDILL Suite, Apt. #, etc 01122004 STE 220 Chg-NP CR2E037 (10/03) 07E 22 City & State 4. FEI Number Applied For 59-3629619 Not Applicable Country \$8.75 Additional 3629 5. Certificate of Status Desired TUS BÜRXBH Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TAYLOR, J. ERIC 101 E. KENNEDY BLVD., STE. 2700 Street Address (P.O. Box Number is Not Acceptable) TAMPA, FL 33602 Zip Code 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) Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Due by May 1, 2004 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE Change ☐ Addition NAME MURRAY, JAMES K JR NAME STREET ADDRESS 777 S. HARBOR ISLAND BLVD., #760 1700 SMALDILL AVE. STELZO STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33602 CITY-ST-ZIP TAMPA, FL 33629 TITLE Delete TITLE Change Addition NAME MURRAY, SANDRA H NAME 1700 S. MacDILL AVE - STE ZZO 777 S. HARBOR ISLAND BLVD., #760 STREET ADDRESS STREET ADDRESS 17000. 11 33629 X Change CITY-ST-7IP **TAMPA, FL 33602** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME MURRAY, MICHAEL S NAME 1700 S MacDILL AVE. STE 220 TAMPA, PL 33629 STREET ADDRESS 777 S. HARBOR ISLAND BLVD., #760 STREET ADDRESS CITY-ST-7IP TAMPA, FL 33602 CITY-ST-ZIP TITLE ☐ Delete TITLE NAME MURRAY, JAMES K III NAME STREET ADDRESS 777 S. HARBOR ISLAND BLVD. STE 760 1700 S. MacDILL AUE-STE 220 DAMPA, FL 33629 STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33602 CITY-ST-ZIP TITLE ☐ Delete TITLE LEE, ANTHONY S NAME NAME 777 W. HARBOR ISLAND BLVD. STE 760 STREET ADDRESS 1700 S. MacDILL AVE. 51 220 AMPA, FL 33629 STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33602 CITY-ST-ZIP TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 12. I hereby certify that the information supplied with this filling 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 changed, or on an attachment with an address, with all other like empowered.

michal 5 M SIGNATURE: 2/20/04 813.223.2424 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR