

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004719

FILED
Jan 14, 2004
Secretary of State

Entity Name: LINDA MIHALCIK EDUCATIONAL FOUNDATION, INC.

Current Principal Place of Business:

4 ELEVENTH AVENUE, SUITE 1
SHALIMAR, FL 32579 US

New Principal Place of Business:

Current Mailing Address:

4 ELEVENTH AVENUE, SUITE 1
SHALIMAR, FL 32579 US

New Mailing Address:

FEI Number: 31-1762816

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERRI, DANIEL C
4 ELEVENTH AVENUE, SUITE 1
SHALIMAR, FL 32579 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: MIHALCIK, MICHAEL J
Address: 11 STEPHEN DRIVE
City-St-Zip: NICEVILLE, FL 32578

Title: D () Delete
Name: PERRI, DANIEL C
Address: 4 ELEVENTH AVENUE, SUITE 1
City-St-Zip: SHALIMAR, FL 32579 US

Title: D () Delete
Name: HERNDON, D. TIMOTHY
Address: 4502 HWY 20 EAST
City-St-Zip: NICEVILLE, FL 32579

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MIHALCIK, MICHAEL J
Address: 1100 STEPHEN DRIVE
City-St-Zip: NICEVILLE, FL 32578

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: DANIEL C. PERRI

D

01/14/2004

Electronic Signature of Signing Officer or Director

Date