

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005456

FILED
Aug 31, 2004
Secretary of State

Entity Name: FIGHTING ELDER ABUSE TOGETHER, INC.

Current Principal Place of Business:

591 JUPITER BLVD, NW
PALM BAY, FL 32907

New Principal Place of Business:

Current Mailing Address:

591 JUPITER BLVD, NW
PALM BAY, FL 32907

New Mailing Address:

FEI Number: 59-3688154

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRIDDLE, JUDITH A
591 JUPITER BLVD, NW
PALM BAY, FL 32907

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: P () Delete
Name: AHLER FRIDDLE, JUDITH K
Address: 591 JUPITER NW
City-St-Zip: PALM BAY, FL 32907

Title: D () Delete
Name: HENGSTEBECK, BARBARA
Address: 8094 BUCKLAKE RD
City-St-Zip: TALLAHASSEE, FL 32311

Title: D () Delete
Name: BRYANT, NANCY
Address: 3001 SEQUOYA
City-St-Zip: PRESCOTT, AZ 86301

Title: D () Delete
Name: AHLER, DORIS
Address: 581 JUPITER NW
City-St-Zip: PALM BAY, FL 32907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JUDITH A FRIDDLE

PRES

08/31/2004

Electronic Signature of Signing Officer or Director

Date