

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006619

FILED
Apr 13, 2004
Secretary of State**Entity Name:** INTERNATIONAL RELIEF FUND, INC.**Current Principal Place of Business:**2771-29 MONUMENT OAD
SUITE 344
JACKSONVILLE, FL 32225**New Principal Place of Business:**2771-29 MONUMENT ROAD
SUITE 344
JACKSONVILLE, FL 32225 US**Current Mailing Address:**2771-29 MONUMENT OAD
SUITE 344
JACKSONVILLE, FL 32225**New Mailing Address:**2771-29 MONUMENT ROAD
SUITE 344
JACKSONVILLE, FL 32225 US**FEI Number:** 59-3675763**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US**Name and Address of New Registered Agent:**JASON, STEPHANIE M
2771-29 MONUMENT ROAD
SUITE 344
JACKSONVILLE, FL 32225 US

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: STEPHANIE JASON

04/13/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: D () Delete
Name: JASON, STEPHANIE M
Address: 2771-29 MONUMENT OAD
City-St-Zip: JACKSONVILLE, FL 32225Title: T () Delete
Name: CHANDLER, HELEN
Address: 2771-29 MONUMENT OAD
City-St-Zip: JACKSONVILLE, FL 32225Title: T () Delete
Name: JASON, SCOTT R DR.
Address: 2771-29 MONUMENT OAD
City-St-Zip: JACKSONVILLE, FL 32225Title: ED () Delete
Name: RIGBY, MONIQUE
Address: 2771-29 MONNMEET RD #344
City-St-Zip: JACKSONVILLE, FL 32225**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: D (X) Change () Addition
Name: JASON, STEPHANIE M
Address: 2771-29 MONUMENT ROAD #344
City-St-Zip: JACKSONVILLE, FL 32225 USTitle: T (X) Change () Addition
Name: CHANDLER, HELEN
Address: 2771-29 MONUMENT ROAD #344
City-St-Zip: JACKSONVILLE, FL 32225 USTitle: T (X) Change () Addition
Name: JASON, SCOTT R DR.
Address: 2771-29 MONUMENT ROAD #344
City-St-Zip: JACKSONVILLE, FL 32225Title: ED (X) Change () Addition
Name: RIGBY, MONIQUE S
Address: 2771-29 MONNMEET ROAD #344
City-St-Zip: JACKSONVILLE, FL 32225

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: STEPHANIE JASON

PRES

04/13/2004

Electronic Signature of Signing Officer or Director

Date