

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 09, 2004
Secretary of State**

DOCUMENT# N00000007542

Entity Name: OLIVER'S HOUSE, INCORPORATED

Current Principal Place of Business:

355 MARLBOROUGH
WEST PALM BEACH, FL 33405

New Principal Place of Business:

Current Mailing Address:

355 MARLBOROUGH
WEST PALM BEACH, FL 33405

New Mailing Address:

FEI Number: 65-1124991 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROWELL, BETH C CPA
609 N. HEPBURN AVENUE
SUITE 105
JUPITER, FL 33458 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: BOTTCHER, LISA
Address: 355 MARLBOROUGH
City-St-Zip: WEST PALM BEACH, FL 33405

Title: D () Delete
Name: CROWELL, BETH C CPA
Address: 609 N. HEPBURN AVENUE #105
City-St-Zip: JUPITER, FL 33458

Title: D () Delete
Name: OCHSTEIN, BRAD D.V.M.
Address: 262 SUNSET AVENUE
City-St-Zip: PALM BEACH, FL 33480

Title: D () Delete
Name: STOUT, WENDY
Address: 15178 111TH TERRACE
City-St-Zip: JUPITER, FL 33478

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: LISA T. BOTTCHER

D

01/09/2004

Electronic Signature of Signing Officer or Director

Date