2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000140

Entity Name: WEST PALM BEACH FRONT PORCH, INC.

FILED Mar 01, 2004 Secretary of State

Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
428 NORTHWOOD ROAD SUITE E-4 WEST PALM BEACH, FL 33407			517 25TH STREET WEST PALM BEACH,	FL 33407	
Current N	lailing Addres	ss:	New Mailing Address	New Mailing Address:	
428 NORTHWOOD ROAD SUITE E-4 WEST PALM BEACH, FL 33407			517 25TH STREET WEST PALM BEACH,	FL 33407	
FEI Number	: 65-1137904	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
WILLIAMS, CONI 428 NORTHWOOD ROAD SUITE E-4 WEST PALM BEACH, FL 33407			WILLIAMS, CONI 517 25TH STREET WEST PALM BEACH,		
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATUI	RE:			03/01/2004	
	Electror	ic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	HORTON, EDV 1919 SPRUCE	Delete /ARD EACH, FL 33407	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PIERRE, AUDII 737 41ST STR		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	MOORE, ALICE 801 8TH STRE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D () SMITH, DENISI 624 43RD STR		Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: ALICE E. MOORE D 03/01/2004

WEST PALM BEACH, FL 33407

City-St-Zip: