

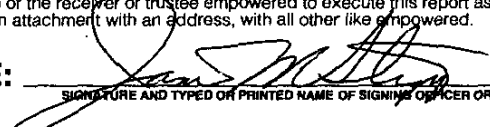


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 26, 2004 8:00 am**  
**Secretary of State**

04-26-2004 90451 001 \*\*\*\*61.25

<b>DOCUMENT # N01000001641</b> 1. Entity Name <b>WEST MELBOURNE ELEMENTARY NONPROFIT CORPORATION</b>					
Principal Place of Business <b>2255 MEADOWLANE AVE MELBOURNE, FL 32904</b>			Mailing Address <b>2255 MEADOWLANE AVE MELBOURNE, FL 32904</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>59-3705777</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>STIPP, JANICE</b> <b>680 CARRIAGE HILL ROAD</b> <b>MELBOURNE, FL 32940</b>				Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b></span> Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  <b>JANICE STEPP</b> <span style="float: right;"><b>4/19/04</b></span> <small>(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE)</small>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <b>STIPP, JANICE</b> <b>680 CARRIAGE HILL ROAD</b> <b>MELBOURNE, FL 32940</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <b>ROTH, ADRIENNE</b> <b>633 DESOTO LANE</b> <b>INDIAN HARBOUR BEACH, FL 32937</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD <b>PIERCE, VALERIE</b> <b>1833 WOODBERRY CIRCLE</b> <b>MELBOURNE, FL 32935</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <b>SALBERG, DUKE</b> <b>2452 WOODFIELD CIRCLE</b> <b>WEST MELBOURNE, FL 32904</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D SUSAN KAWA</b> <b>1824 SABAL PALM DRIVE</b> <b>MELBOURNE, FL 32934</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>UBER, BOB</b> <b>859 GERA AVENUE NW</b> <b>PALM BAY, FL 32907</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>COARD, BUDDY</b> <b>1605 PGA BLVD.</b> <b>MELBOURNE, FL 32935</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b>  <b>JANICE STEPP</b> <span style="float: right;"><b>4/19/04</b> <b>321-242-1923</b></span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					