

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001919

Entity Name: THE FEED JAMAICA FOUNDATION INC

FILED  
Apr 29, 2004  
Secretary of State

**Current Principal Place of Business:**

7011 NW 38TH MANOR  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

7011 NW 38TH MANOR  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

FEI Number: 65-1139984

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MELVILLE, ANDREW B  
4725 NW 3RD STREET  
PLANTATION, FL 33317 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: PD ( ) Delete  
Name: CHANNER, ALMANDO  
Address: 7011 NW 38TH MANOR  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VD ( ) Delete  
Name: BARRETT, CLIFTON  
Address: 6754 SIENNA CLUB DRIVE  
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: D ( ) Delete  
Name: MELVILLE, ANDREW  
Address: 4725 NW 3RD STREET  
City-St-Zip: PLANTATION, FL 33317

Title: D ( ) Delete  
Name: BARRETT, AVA  
Address: 6754 SIENNA CLUB DRIVE  
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: D ( ) Delete  
Name: SHAW, ERIC  
Address: 4959 NW 115 WAY  
City-St-Zip: CORAL SPRINGS, FL 33076

**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:

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: CLIFTON BARRETT

VD

04/29/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date