

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006416

FILED
Apr 29, 2004
Secretary of State

Entity Name: CITIZENS MAKING A DIFFERENCE, INC.

Current Principal Place of Business:

PO BOX 9348
PANAMA CITY, FL 32417

New Principal Place of Business:

Current Mailing Address:

PO BOX 9348
PANAMA CITY, FL 32417

New Mailing Address:

FEI Number: 59-2857564

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

APPLEBAUM, STEVEN L
9108 FRONT BEACH RD.
PANAMA CITY, FL 32407 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: BISHOP, JACK
Address: PO BOX 9348
City-St-Zip: PANAMA CITY, FL 32417

Title: D (X) Delete
Name: BENNETT, JULIAN
Address: PO BOX 9348
City-St-Zip: PANAMA CITY, FL 32417

Title: D (X) Delete
Name: BRYSON, TONY
Address: PO BOX 9348
City-St-Zip: PANAMA CITY, FL 32417

Title: D (X) Delete
Name: GHEESLING, JOHN III
Address: PO BOX 9348
City-St-Zip: PANAMA CITY, FL 32417

Title: D (X) Delete
Name: GILMORE, DOUG
Address: PO BOX 9348
City-St-Zip: PANAMA CITY, FL 32417

Title: D (X) Delete
Name: HARDY, RON
Address: PO BOX 9348
City-St-Zip: PANAMA CITY, FL 32417

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GRIFFITTS, JR., PHILIP
Address: 20723
City-St-Zip: PANAMA CITY BEACH, FL 32413

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: DEBI KNIGHT

PRES

04/29/2004

Electronic Signature of Signing Officer or Director

Date