

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008329

FILED
Apr 30, 2004
Secretary of State

Entity Name: THE BRITISH-AMERICAN FOUNDATION, INC.

Current Principal Place of Business:

2187 NW 63RD AVENUE
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

2187 NW 63RD AVENUE
MARGATE, FL 33063

New Mailing Address:

FEI Number: 65-1159124

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARTWRIGHT, CLINTON
6705 NORTHWEST 77TH STREET
TAMARAC, FL 33321 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: COO () Delete
Name: CARTWRIGHT, CLINTON
Address: 6705 NORTHWEST 77TH STREET
City-St-Zip: TAMARAC, FL 33321

Title: PSD () Delete
Name: BRAWN, PETER M
Address: 2187 NW 63RD AVENUE
City-St-Zip: MARGATE, FL 33063

Title: VPTD () Delete
Name: OTT, SEAN
Address: 2187 NW 63RD AVENUE
City-St-Zip: MARGATE, FL 33063

Title: D () Delete
Name: FERNANDEZ, GIL E
Address: 1041 WEST COMMERCIAL BLVD, #102
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D () Delete
Name: ROSE, SCOTT
Address: 1891 N DIXIE HWY
City-St-Zip: BOCA RATON, FL 33432

Title: D () Delete
Name: DUKER, STEVEN D
Address: 2832 UNIVERSITY DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

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:

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: CLINTON CARTWRIGHT

COO

04/30/2004

Electronic Signature of Signing Officer or Director

Date