

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008955

Entity Name: MENTIS, INC.

FILED
Apr 26, 2004
Secretary of State

Current Principal Place of Business:

73 S PALM AVE, SUITE 215
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

73 S PALM AVE, SUITE 215
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 74-3026328

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEIGEL, BLAIR A
2361 FIESTA
SARASOTA, FL 34231 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: PTD () Delete
Name: MCMURRAY, DONALD A
Address: 1303 LANDINGS DR
City-St-Zip: SARASOTA, FL 34236

Title: SD () Delete
Name: MCMURRAY, MEREDITH F
Address: 1303 LANDINGS DR
City-St-Zip: SARASOTA, FL 34231

Title: D () Delete
Name: FOX, JENNIFER
Address: 6476 29TH WAY N
City-St-Zip: ST PETERSBURG, FL 33702

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:

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: DONALD A. MCMURRAY

PTD

04/26/2004

Electronic Signature of Signing Officer or Director

Date