


**2004 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 19, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N02000001759</b> 1. Entity Name <b>THE GOODALE FUND, INC.</b>	
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Principal Place of Business %JOHN E. MOORE, III 5070 N. HWY. A1A, SUITE 200 VERO BEACH, FL 32963	Mailing Address %JOHN E. MOORE, III 5070 N. HWY. A1A, SUITE 200 VERO BEACH, FL 32963
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**DO NOT WRITE IN THIS SPACE**

01072004 No Chg-NP CR2E037 (10/03)

4. FEI Number <b>38-3315943</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

MOORE, JOHN E III  
5070 N. HWY. A1A, SUITE 200  
VERO BEACH, FL 32963

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2004**

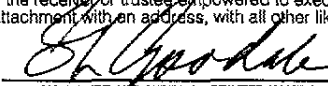
9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GOODALE, STEPHEN L %JOHN E. MOORE, III, 5070 N. HWY, A1A, #200 VERO BEACH, FL 32963
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GOODALE, MARGERY C %JOHN E. MOORE, III, 5070 N. HWY, A1A, #200 VERO BEACH, FL 32963
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MOORE, JOHN E III 5070 N. HWY, A1A, SUITE 200 VERO BEACH, FL 32963
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

000000058141  
02/20/04-80018-007 61.25

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

**SIGNATURE:**  **S.L. GOODALE** **2-14-04** **772-234 8333**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #