## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000002711

FILED Jun 30, 2004 Secretary of State

Entity Name: HIBISCUS LODGE NO. 275 CHARITABLE FOUNDATION, INC.

**New Principal Place of Business: Current Principal Place of Business:** P.O. BOX 770218 MIAMI, FL 331770218 **Current Mailing Address: New Mailing Address:** 9100 SOUTH DADELAND BLVD. P.O. BOX 770218 SUITE 512 SUITE 512 MIAMI, FL 33156 MIAMI, FL 331770218 FEI Number: 01-0683090 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: **BUSINESS FILINGS INCORPORATED** 660 EAST JEFFERSON STREET TALLAHASSEE, FL 323010000 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete HOLIAN, JOHN Name: Name: Address: 641 PALERMO AVE Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: () Delete Title: () Change () Addition CONTERIO, GREGORY Name: Name: Address: 6160 SW 63 AVE Address: City-St-Zip: SOUTH MIAMI, FL 33143 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition DUNETZ, ROGER Name: DUNETZ, ROGER Name: Address: 88 CADINA AVE Address: 88 CADIMA AVE City-St-Zip: CORAL GABLES, FL 33146 City-St-Zip: CORAL GABLES, FL 33134 ( ) Delete Title: Title: (X) Change ( ) Addition Name: CESPEDES, CANOS Name: CESPEDES, CARLOS Address: PO BOX 770215 Address: PO BOX 770215 City-St-Zip: MIAMI, FL 331770004 City-St-Zip: MIAMI, FL 331770004

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: ROGER M. DUNETZ TR 06/30/2004