

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

**FILED  
Apr 30, 2004  
Secretary of State**

DOCUMENT# N02000004598

**Entity Name:** CENTER FOR ACUPUNCTURE RESEARCH AND EDUCATION, INCORPORATED

**Current Principal Place of Business:**

107 SW 7TH ST.  
GAINESVILLE, FL 32601

**New Principal Place of Business:**

**Current Mailing Address:**

107 SW 7TH ST.  
GAINESVILLE, FL 32601

**New Mailing Address:**

**FEI Number:** 35-2174978      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HAYES, MARY J  
2011 NW 22ND ST.  
GAINESVILLE, FL 32605      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: 1VP ( ) Delete  
Name: BLACKMOORE, JAN  
Address: 107 SW 7TH STREET  
City-St-Zip: ORLANDO, FL 32807

Title: P ( ) Delete  
Name: HAYES, MARY JO  
Address: 2011 NW 22ND STREET  
City-St-Zip: GAINESVILLE, FL 32605

Title: 2VP ( ) Delete  
Name: HUESSY STAHMAN, PAULA  
Address: 4221 CLEAR LAKE DR  
City-St-Zip: GAINESVILLE, FL 32607

Title: T ( ) Delete  
Name: PARRISH, MARGARET  
Address: 6633 NE 18TH PL  
City-St-Zip: GAINESVILLE, FL 32609

Title: S ( ) Delete  
Name: ARCHER, PAMELA J  
Address: 3140 NE 162 PLACE  
City-St-Zip: CITRA, FL 32113

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: 1VP (X) Change ( ) Addition  
Name: BLACKMORE, JAN  
Address: 107 SW 7TH STREET  
City-St-Zip: GAINESVILLE, FL 32807

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: JAN BLACKMORE

VP

04/30/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date