

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005162

Entity Name: THE REFUGE, INC.

FILED
Jan 27, 2004
Secretary of State

Current Principal Place of Business:

357 SE PORT ST. LUCIE BLVD.
PORT ST. LUCIE, FL 34984

New Principal Place of Business:

357 SE PORT ST. LUCIE BLVD.
PORT ST. LUCIE, FL 34984 US

Current Mailing Address:

P O BOX 880535
PORT ST LUCIE, FL 34988

New Mailing Address:

P O BOX 880535
PORT ST LUCIE, FL 34988 US

FEI Number: 20-0488117

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TURNER, JAMES E. C
274 SW GROVE AVENUE
PORT ST. LUCIE, FL 34983 US

Name and Address of New Registered Agent:

TURNER, JAMES E. C
101SW GLENWOOD DR.
PORT ST. LUCIE, FL 34984 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:

01/27/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TURNER, JAMES E. C
Address: 274 SW GROVE AVENUE
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: D () Delete
Name: BATES, JACK M
Address: 2827 B STONEWAY LN
City-St-Zip: FT PIERCE, FL 34982

Title: D (X) Delete
Name: CINTRON, WILLIAM
Address: 401 SE FAIRCHILD AVENUE
City-St-Zip: PORT ST. LUCIE, FL 34984

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TURNER, JAMES E. C
Address: 101 SW GLENWOOD DR.
City-St-Zip: PORT ST. LUCIE, FL 34084

Title: D (X) Change () Addition
Name: PAYNE, PAUL J
Address: 1100 EGRET AVE.
City-St-Zip: FT PIERCE, FL 34982

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: JAMES E.C. TURNER

D

01/27/2004

Electronic Signature of Signing Officer or Director

Date