2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 21, 2004
Secretary of State

DOCUMENT# N02000005892

Entity Name: STUDENT FARMWORKER ALLIANCE, INC.

Current Principal Place of Business:

215 F WEST MAIN ST.
IMMOKALEE, FL 34143

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 603
IMMOKALEE, FL 34143

New Mailing Address:

FEI Number: 33-1067943 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DANIEL, JULIA
2111 VINSON AVE.
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

DANIEL, JULIA
2111 VINSON AVE.
MIAMI, FL 34232 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: _____ 06/21/2004
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: CHAVEZ, GERARDO
Address: 215 F WEST MAIN ST.
City-St-Zip: IMMOKALEE, FL 34143

Title: D ( ) Delete
Name: CORTEZ, FRANCISCA
Address: 215 F WEST MAIN ST.
City-St-Zip: IMMOKALEE, FL 34143

Title: D ( ) Delete
Name: RODRIGUEZ, KATHRYN
Address: 215 F WEST MAIN ST.
City-St-Zip: IMMOKALEE, FL 34143

Title: D ( ) Delete
Name: LEBER, MATT
Address: 215 F WEST MAIN ST.
City-St-Zip: IMMOKALEE, FL 34143

Title: D ( ) Delete
Name: PEREZ, LAUREN
Address: 215 F WEST MAIN ST.
City-St-Zip: IMMOKALEE, FL 34143

Title: D ( ) Delete
Name: PALLADINO, LEONORE
Address: 215 F WEST MAIN ST.
City-St-Zip: IMMOKALEE, FL 34143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: PAYNE, BRIAN
Address: 215 F WEST MAIN ST.
City-St-Zip: IMMOKALEE, FL 34143

Title: D (X) Change ( ) Addition
Name: GONZALEZ, MELODY
Address: 844 PASQUERRILLA EAST
City-St-Zip: SOUTH BEND, IN 46556

Title: D (X) Change ( ) Addition
Name: DAMARA, LUZ
Address: 1109 NEW MARKET RD
City-St-Zip: IMMOKALEE, FL 34143

Title: D (X) Change ( ) Addition
Name: GYNTHER, BRIGITTE
Address: 1109 NEW MARKET RD
City-St-Zip: IMMOKALEE, FL 34143

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: BRIGITTE GYNTHER D 06/21/2004
Electronic Signature of Signing Officer or Director — Date

TIFFANY TEN EYCK
5120 E BLANCHARD RD
SHEPERD, MI 48883

MONICA REEDY
GAINESVILLE, FL

KATE CHANTON
SARASOTA, FL

BRIE PHILLIPS
8564 N BEGOLE RD
ST LOUIS, MI 48880

NICK LASCOWSKI
1459 LUNING DR
SAN JOSE, CA 95118