

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006674

FILED
Feb 24, 2004
Secretary of State

Entity Name: FLORIDIANS FOR FAIRNESS ACTION FUND, INC.

Current Principal Place of Business:

1538 CRISTOBAL DR.
TALLAHASSEE, FL 32303

New Principal Place of Business:

1030 HOLLAND DRIVE
TALLAHASSEE, FL 32301

Current Mailing Address:

P.O. BOX 10286
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 81-0568312 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DAVANT, CLAUDIA
1538 CRISTOBAL DR.
TALLAHASSEE, FL 32303

Name and Address of New Registered Agent:

BROWN, STEVE
1030 HOLLAND DRIVE
TALLAHASSEE, FL 32301

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: STEVE BROWN 02/24/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JOHNSON, BARRY
Address: 10481 NW 51ST ST.
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D () Delete
Name: DAVANT, CLAUDIA
Address: 1538 CRISTOBAL DR.
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: JOSKO, TODD
Address: 2895 BAYSHORE TRAILS DR.
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BROWN, STEVE
Address: PO BOX 10286
City-St-Zip: TALLAHASSEE, FL 32302

Title: D (X) Change () Addition
Name: RIMES, JIM
Address: PO BOX 10286
City-St-Zip: TALLAHASSEE, FL 32302

Title: D (X) Change () Addition
Name: LAW, JOHN
Address: PO BOX 10286
City-St-Zip: TAMPA, FL 32302

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: JIM RIMES D 02/24/2004

Electronic Signature of Signing Officer or Director Date