2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2004
Secretary of State

DOCUMENT# N02000007945

Entity Name: ST. MATTHEW'S CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

1005 W COLLEGE BLVD
SUITE A
NICEVILLE, FL 32578

New Principal Place of Business:

Current Mailing Address:

1005 W COLLEGE BLVD
SUITE A
NICEVILLE, FL 32578

New Mailing Address:

FEI Number: 11-3657535 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARRIS, MICHAEL A
205 HIGHLAND AVE
VALPARAISO, FL 32580

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:	D	( ) Delete
Name:	HARRIS, MICHAEL A	
Address:	205 HIGHLAND AVE	
City-St-Zip:	VALPARAISO, FL 32580	
Title:	D	( ) Delete
Name:	SWARTZENDRUBER, GA;EM L P	
Address:	1921 WALDOMERE ST	
City-St-Zip:	SARASOTA, FL 32239	
Title:	D	( ) Delete
Name:	THORNTON, JERRY W	
Address:	1750 W BRAODWAY	
City-St-Zip:	OVIEDO, FL 32765	
Title:	D	( ) Delete
Name:	OWENS, B D	
Address:	13576 LAKE PT DR SOUTH	
City-St-Zip:	CLEARWATER, FL 33762	
Title:	D	( ) Delete
Name:	PRINGLE, JAMES	
Address:	20 OLD GREAT FALLS ROAD	
City-St-Zip:	WINDHAM, ME 04062	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:	
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: MICHAEL A HARRIS D 03/15/2004

Electronic Signature of Signing Officer or Director — Date