

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008889

Entity Name: REPA FOUNDATION, INC.

FILED
Apr 28, 2004
Secretary of State

Current Principal Place of Business:

3491 PALL MALL DRIVE, SUITE 201-B
JACKSONVILLE, FL 32257

New Principal Place of Business:

3491 PALL MALL DRIVE
SUITE 205
JACKSONVILLE, FL 32257

Current Mailing Address:

3491 PALL MALL DRIVE, SUITE 201-B
JACKSONVILLE, FL 32257

New Mailing Address:

3491 PALL MALL DRIVE
SUITE 205
JACKSONVILLE, FL 32257

FEI Number: 90-0062288

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLLAND, EVERETT N
3491 PALL MALL DRIVE, SUITE 201-B
JACKSONVILLE, FL 32257

Name and Address of New Registered Agent:

HOLLAND, EVERETT N
3491 PALL MALL DRIVE
SUITE 205
JACKSONVILLE, FL 32257

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:

04/28/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CASADABAN, EUGENE J
Address: PO BOX 280
City-St-Zip: NORWOOD, LA 70761

Title: D () Delete
Name: HOLLAND, EVERETT N
Address: 1112 KINGSLAND COURT
City-St-Zip: JACKSONVILLE, FL 32259

Title: D () Delete
Name: BRILLAUD, ALBERT E
Address: 2531 CROSS COUNTRY DR.
City-St-Zip: DAYTONA BEACH, FL 32124

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:

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: EVERETT N HOLLAND

SD

04/28/2004

Electronic Signature of Signing Officer or Director

Date