

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 08, 2004
Secretary of State**

DOCUMENT# N02000009073

Entity Name: MIRAXIS FOUNDATION, INC.

Current Principal Place of Business:

C/O FLORIDA COMMERCIAL SPACE FINANCING COR
P. 403 BREVARD AVE STE 1
COCOA, FL 32922

New Principal Place of Business:

Current Mailing Address:

C/O FLORIDA COMMERCIAL SPACE FINANCING COR
P. 403 BREVARD AVE STE 1
COCOA, FL 32922

New Mailing Address:

FEI Number: 58-2658030 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEUKAMM, MICHAEL E
C/O GRAY, HARRIS & ROBINSON, P.A.
301 E PINE ST STE 1400
ORLANDO, FL 32801 US

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: T () Delete
Name: DIBELLO, FRANCIS A
Address: 403 BREVARD AVE STE 1
City-St-Zip: COCOA, FL 32922

Title: T () Delete
Name: LEDDY, JEFFREY A
Address: PO BOX 921398
City-St-Zip: NORCROSS, GA 30010

Title: T () Delete
Name: MORGAN, STEPHEN L
Address: PO BOX 372546
City-St-Zip: SATELLITE BCH, FL 32937

Title: T () Delete
Name: MOWELL, JOHN B
Address: 407 3 6 AVE
City-St-Zip: TALLAHASSEE, FL 32315

Title: T () Delete
Name: CLARK, GREGORY J DR.
Address: 923 FIFTH AVE STE 7C
City-St-Zip: NEW YORK, NY 10021

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: JEFFREY LEDDY

MR.

01/08/2004

Electronic Signature of Signing Officer or Director

_____ Date