

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009370

FILED
May 19, 2004
Secretary of State**Entity Name:** THE INTERFAITH ALLIANCE OF FLORIDA, INCORPORATED**Current Principal Place of Business:**101 LA COSTA STREET #B-5
MELBOURNE BEACH, FL 32951**New Principal Place of Business:**818 VERONICA COURT
INDIAN HARBOUR BEACH, FL 32937**Current Mailing Address:**101 LA COSTA STREET #B-5
MELBOURNE BEACH, FL 32951**New Mailing Address:**818 VERONICA COURT
INDIAN HARBOUR BEACH, FL 32937**FEI Number:****FEI Number Applied For (X)****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HIGGINS, JOHN M REV
101 LA COSTA STREET #B-5
MELBOURNE BEACH, FL 32951 US**Name and Address of New Registered Agent:**HIGGINS, JOHN M REV
818 VERONICA COURT
INDIAN HARBOUR BEACH, FL 32937 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: JOHN M. HIGGINS

05/19/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: DT () Delete
Name: CLOVIS, BARBARA
Address: 14301 SW 101ST LANE
City-St-Zip: DENNELLON, FL 34432Title: D () Delete
Name: FERNSTER, EUGENE R REV
Address: 2348 SPARROW AVENUE
City-St-Zip: SEABRING, FL 32951Title: PD () Delete
Name: HIGGINS, JOHN M
Address: 101 LA COSTA STREET #B-5
City-St-Zip: MELBOURNE BEACH, FL 32951Title: D () Delete
Name: JOHNSON, JUDY D
Address: 2416 SE 12TH STREET
City-St-Zip: OCALA, FL 34471Title: D () Delete
Name: JAMES, MARINE DR.
Address: 309 LOON AVENUE
City-St-Zip: SEBRING, FL 33872Title: D () Delete
Name: ROSE, HERBERT H
Address: 4893 CARRINGTON CIRCLE
City-St-Zip: SARASOTA, FL 34243**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
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City-St-Zip:Title: () Change () Addition
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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: JOHN M. HIGGINS

PRES

05/19/2004

Electronic Signature of Signing Officer or Director

Date

E. MCKINNON WHITE DIRECTOR
UNIT A 9800 SW 85TH TERRACE RD.
OCALA, FL 34481-6692