2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2004
Secretary of State

DOCUMENT# N02000009389

Entity Name: MENTORING EXCHANGE, INC.

Current Principal Place of Business:

300 S SYKES CREEK PKWY
MERRITT TOWERS 807C
MERRITT ISLAND, FL 32952

New Principal Place of Business:

300 S SYKES CREEK PKWY 807C
MERRITT TOWERS 807C
MERRITT ISLAND, FL 32952

Current Mailing Address:

300 S SYKES CREEK PKWY
MERRITT TOWERS 807C
MERRITT ISLAND, FL 32952

New Mailing Address:

300 S SYKES CREEK PKWY 807C
MERRITT TOWERS 807C
MERRITT ISLAND, FL 32952

FEI Number: 57-1142568 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KAUFMANN, LUCY D
300 S SYKES CREEK PKWY
MERRITT TOWERS 807C
MERRITT ISLAND, FL 32952 US

Name and Address of New Registered Agent:

KAUFMANN, LUCY D
300 S SYKES CREEK PKWY 807C
MERRITT TOWERS 807C
MERRITT ISLAND, FL 32952 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: LUCY D KAUFMANN 03/30/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: KAUFMANN, LUCY D
Address: 300 S SYKES CREEK PKWY - 807C
City-St-Zip: MERRITT ISLAND, FL 32952

Title: SEC ( ) Delete
Name: KAUFMANN, JOHN H
Address: 300 S SYKES CREEK PKWY - 807C
City-St-Zip: MERRITT ISLAND, FL 32952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LUCY D KAUFMANN P 03/30/2004
Electronic Signature of Signing Officer or Director Date