

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000349

Entity Name: ESPRIT DE CORPS, INC.

FILED  
Jan 27, 2004  
Secretary of State

## Current Principal Place of Business:

10550 BAYMEADOWS ROAD #230  
JACKSONVILLE, FL 32256

## New Principal Place of Business:

400 E BAY ST  
APT 301  
JACKSONVILLE, FL 32202

## Current Mailing Address:

POST OFFICE BOX 2767  
JACKSONVILLE, FL 322032767

## New Mailing Address:

400 E BAY ST  
APT 301  
JACKSONVILLE, FL 32202

FEI Number: 01-0665842

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DZIKOWSKI, PHIL  
10550 BAYMEADOWS ROAD #230  
JACKSONVILLE, FL 32256

## Name and Address of New Registered Agent:

ADAMS, HEATHER S PRES  
400 E BAY ST  
APT 301  
JACKSONVILLE, FL 32202

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: HEATHER S ADAMS

01/27/2004

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DZIKOWSKI, PHIL  
Address: 9700 TOUCHTON ROAD  
City-St-Zip: JACKSONVILLE, FL 32246

Title: PD ( ) Delete  
Name: ADAMS, HEATHER  
Address: 1301 RIVERPLACE BLVD. #2400  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D (X) Delete  
Name: OSGOOD, KELLIE  
Address: 505 9TH STREET NORTH  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D ( ) Delete  
Name: BOECKMAN, LAURA  
Address: 2223 ST. JOHN'S AVENUE  
City-St-Zip: JACKSONVILLE, FL 32204

Title: D (X) Delete  
Name: COLLINS, SHAYANN  
Address: 218 CRANE LAKES DRIVE  
City-St-Zip: PONTE VEDRA, FL 32082

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: ADAMS, HEATHER S PRES  
Address: 1301 RIVERPLACE BLVD STE 2400  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D (X) Change ( ) Addition  
Name: DZIKOWSKI, PHILIP TREASUR  
Address: 9500 TOUCHTON ROAD  
City-St-Zip: JACKSONVILLE, FL 32216

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: BOECKMAN, LAURA SECRETA  
Address: 2223 ST. JOHN'S AVENUE  
City-St-Zip: JACKSONVILLE, FL 32204

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: HEATHER S ADAMS

PRES

01/27/2004

Electronic Signature of Signing Officer or Director

Date