2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004
Secretary of State

DOCUMENT# N03000003586

Entity Name: MAKE A DIFFERENCE SOUTH FLORIDA, INC.

Current Principal Place of Business:

333 KELSEY PARK CIR.
PALM BCH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

333 KELSEY PARK CIR.
PALM BCH GARDENS, FL 33410

New Mailing Address:

FEI Number: 47-0917687 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLIGAN, ALPHONSO S ESQ.
2580 METROCENTRE BLVD., SUITE 6
W. PALM BCH, FL 33407 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: D ( ) Delete
Name: COPPOCK, MARK S
Address: 333 KELSEY PARK CIR.
City-St-Zip: PALM BCH GARDENS, FL 33410

Title: D ( ) Delete
Name: HOWARD, BETSY
Address: P. O. BOX 701
City-St-Zip: PALM BCH GARDENS, FL 33480

Title: D ( ) Delete
Name: MILLIGAN, ALPHONSO S
Address: P. O. BOX 3254
City-St-Zip: W. PALM BCH, FL 334023254

Title: D ( ) Delete
Name: KAHLE, CRAIG U
Address: 1501 PRESIDENTIAL WAY, SUITE 16
City-St-Zip: W. PALM BCH, FL 33401

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:

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: MARK S. COPPOCK PRES 04/28/2004

Electronic Signature of Signing Officer or Director — Date