2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004097

FILED May 24, 2004 Secretary of State

Entity Name: FIRE ESCAPE MINISTRIES OF SOUTH FLORIDA INC.

Current P	Principal Place of Business:	New Principal Place of Business:
4325 NW : POMPANO	3RD AVE O BEACH, FL 33064	
Current M	Mailing Address:	New Mailing Address:
4325 NW : POMPANO	3RD AVE O BEACH, FL 33064	
FEI Number	: 58-2668072 FEI Number Applied For	() FEI Number Not Applicable () Certificate of Status Desired ()
Name and	d Address of Current Registered Age	ent: Name and Address of New Registered Agent:
4325 NW	N, JAY M SR 3RD AVE	
POMPANO	O BEACH, FL 33064	
The above	O BEACH, FL 33064	or the purpose of changing its registered office or registered agent, or both,
The above	O BEACH, FL 33064 e named entity submits this statement for e of Florida. RE:	
The above in the State SIGNATU	O BEACH, FL 33064 e named entity submits this statement for e of Florida. RE: Electronic Signature of Register	ed Agent Date
The above in the State SIGNATU	O BEACH, FL 33064 e named entity submits this statement for e of Florida. RE:	
The above in the State SIGNATUI OFFICER Title: Name: Address:	O BEACH, FL 33064 e named entity submits this statement for e of Florida. RE: Electronic Signature of Register	ed Agent Date
The above in the State SIGNATU	O BEACH, FL 33064 e named entity submits this statement for e of Florida. RE: Electronic Signature of Register S AND DIRECTORS: PD () Delete WHITMAN, JAY M 4325 NW 3RD AVE	ed Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR: Title: () Change () Addition Name: Address:

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: JAY M. WHITMAN PRES 05/24/2004