2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 03, 2004
Secretary of State

DOCUMENT# N03000007862

Entity Name: PINELLAS POINT FOUNDATION, INC.

Current Principal Place of Business:

1053 SERPENTINE DRIVE
ST. PETERSBURG, FL 33705

New Principal Place of Business:

Current Mailing Address:

1053 SERPENTINE DRIVE
ST. PETERSBURG, FL 33705

New Mailing Address:

FEI Number: 30-0208496 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COX, MAREN
1053 SERPENTINE DRIVE
ST. PETERSBURG, FL 33705

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: PD ( ) Delete
Name: HERSCH, RONALD PH.D.
Address: 1220 FRIENDLY WAY
City-St-Zip: ST. PETERSBURG, FL 33705

Title: VSD ( ) Delete
Name: COX, MAREN
Address: 1053 SERPENTINE DRIVE
City-St-Zip: ST. PETERSBURG, FL 33705

Title: TD ( ) Delete
Name: LEMKE, GERALD
Address: 751 PINELLAS POINT DRIVE
City-St-Zip: ST. PETERSBURG, FL 33705

Title: D ( ) Delete
Name: BERSET, MARK
Address: 1050 FRIENDLY WAY
City-St-Zip: ST. PETERSBURG, FL 33705

Title: D ( ) Delete
Name: CARNES, JOHN PH.D.
Address: 1200 FRIENDLY WAY
City-St-Zip: ST. PETERSBURG, FL 33705

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:

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: GERALD LEMKE TD 07/03/2004
Electronic Signature of Signing Officer or Director — Date