

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Aug 26, 2004
Secretary of State**

DOCUMENT# N03000007994

Entity Name: ST. JOHNS RIVER ALLIANCE, INC.

Current Principal Place of Business:

701 SAN MARCO BLVD STE 7W
JACKSONVILLE, FL 32207

New Principal Place of Business:

409 PLANTATION GROVE LN
ST AUGUSTINE, FL 32086

Current Mailing Address:

701 SAN MARCO BLVD STE 7W
JACKSONVILLE, FL 32207

New Mailing Address:

1960 US HWY 1 SOUTH
#353
ST AUGUSTINE, FL 32086

FEI Number: 20-1416254

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDERSON, CLAY
200 SOUTH ORANGE AVE STE 2600
ORLANDO, FL 32810 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: DELANEY, JOHN
Address: 117 W DUVAL STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: D () Delete
Name: NORTHEY, PAT
Address: 123 W INDIANA AVE
City-St-Zip: DELAND, FL 32720

Title: D () Delete
Name: HARRIS, NANCY
Address: 514 ST JOHNS AVE.
City-St-Zip: PALATKA, FL 32177

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change () Addition
Name: DELANEY, JOHN PRES.
Address: 4567 ST JOHNS BLUFF RD
City-St-Zip: JACKSONVILLE, FL 32224

Title: O (X) Change () Addition
Name: CARLSON, SUE HON
Address: 2725 JUDGE FRAN JAMIESON WAY
City-St-Zip: MELBOURNE, FL 32940

Title: O (X) Change () Addition
Name: HARRIS, NANCY HON
Address: 514 ST JOHNS AVE.
City-St-Zip: PALATKA, FL 32177

Title: O () Change (X) Addition
Name: HENDERSON, CLAY
Address: 200 S. ORANGE AVE, SUITE 2600
City-St-Zip: ORLANDO, FL 32801

Title: O () Change (X) Addition
Name: PEYTON, JOHN HON
Address: 117 W. DUVAL ST, SUITE 400
City-St-Zip: JACKSONVILLE, FL 32202

Title: D () Change (X) Addition
Name: BUSBY, TIFFANY L
Address: 1960 US HWY 1 S. #353
City-St-Zip: ST AUGUSTINE, FL 32086

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: TIFFANY L. BUSBY

D

08/26/2004

Electronic Signature of Signing Officer or Director

Date