2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2004
Secretary of State

DOCUMENT# N03000008618

Entity Name: JOYCE JAY RAYMOND FOUNDATION, INC.

Current Principal Place of Business:

1005 RHODES VILLA AVENUE
DELRAY BEACH, FL 33483

New Principal Place of Business:

2400 MEDINA WAY
WEST PALM BEACH, FL 33401 US

Current Mailing Address:

1005 RHODES VILLA AVENUE
DELRAY BEACH, FL 33483

New Mailing Address:

2400 MEDINA WAY
WEST PALM BEACH, FL 33401 US

FEI Number: 20-0279384 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

RAYMOND, JOHN J JR.
1200 NORTH FEDERAL HIGHWAY
SUITE 420
BOCA RATON, FL 33432 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: PD ( ) Delete
Name: RAYMOND, JOYCE J
Address: C/O 1200 NORTH FEDERAL HWY. #420
City-St-Zip: BOCA RATON, FL 33432

Title: VD ( ) Delete
Name: ADELFIO, LYDIA W
Address: C/O 1200 NORTH FEDERAL HWY. #420
City-St-Zip: BOCA RATON, FL 33432

Title: SD ( ) Delete
Name: HAYES, PATRICIA M
Address: C/O 1200 NORTH FEDERAL HWY. #420
City-St-Zip: BOCA RATON, FL 33432

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:

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: JOYCE J. RAYMOND PD 04/15/2004

Electronic Signature of Signing Officer or Director — Date