2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009135

Entity Name: STREAMS IN THE DESERT INTERNATIONAL, INC.

FILED Jan 08, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 8614 BANEBERRY COURT TAMPA, FL 33647 **Current Mailing Address: New Mailing Address:** 8614 BANEBERRY COURT TAMPA, FL 33647 **FEI Number:** FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COFER, DEBORAH REV. 8614 BANEBERRY COURT TAMPA, FL 33647 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition COFER, DEBORAH REV. Name: Name: Address: 8614 BANEBERRY COURT Address: City-St-Zip: TAMPA, FL 33647 City-St-Zip: Title: () Delete Title: () Change () Addition Name: COFER, RICHARD Name: Address: 8614 BANEBERRY COURT Address: City-St-Zip: TAMPA, FL 33647 City-St-Zip: Title: () Delete Title: () Change () Addition MCDONALD, RENEE Name: Name: 3080 HILLSBORROUGH ROAD Address: Address: City-St-Zip: BRENTWOOD, TN 37027 City-St-Zip: Title: () Delete Title: () Change () Addition Name: MCDONALD, PETER Name: 3080 HILLSBORROUGH ROAD Address: Address: City-St-Zip: BRENTWOOD, TN 37027 City-St-Zip: Title: Title: () Delete () Change () Addition LOTRIDGE, CHERYL Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: REV. DEBORAH COFER P 01/08/2004

11654 W. ONEIDA DRIVE

BOISE, ID 83709

Address:

City-St-Zip: