

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009255

FILED
Jan 09, 2004
Secretary of State

Entity Name: PLAY IT FORWARD FOR MAMA LEE'S CHARITIES, INC.

Current Principal Place of Business:

562 NW 46 STREET
MIAMI, FL 33127 US

New Principal Place of Business:

Current Mailing Address:

562 NW 46 STREET
MIAMI, FL 33127 US

New Mailing Address:

FEI Number: 75-3123979

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALKER-WILSON, ANDREA D
2413 NW 65 STREET
MIAMI, FL 33147 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: PRES () Delete
Name: WALKER, LEOLA K
Address: 562 NW 46 STREET
City-St-Zip: MIAMI, FL 33127 US

Title: 1VP () Delete
Name: BURTON, REISHA
Address: 80 NE 207 STREET
City-St-Zip: MIAMI, FL 33179 US

Title: TREA () Delete
Name: GRANT, ROSE M
Address: 2430 NW 154 STREET
City-St-Zip: MIAMI, FL 33054 US

Title: SEC () Delete
Name: WALKER -ROYSTER, MIA
Address: 15411 NW 32 AVENUE
City-St-Zip: MIAMI, FL 33054 US

Title: PARL () Delete
Name: WALKER, MICHELLE L
Address: 2411 NW 65 STREET
City-St-Zip: MIAMI, FL 33147 US

Title: 2VP () Delete
Name: THONUS, JENNIFER
Address: 9780 NW 10 STREET
City-St-Zip: PEMBROKE PINES, FL 33024 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: 1VP (X) Change () Addition
Name: THONUS, JENNIFER
Address: 9780 NW 10 STREET
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: 2VP (X) Change () Addition
Name: GRANT, ROSE M
Address: 2430 NW 154 STREET
City-St-Zip: MIAMI, FL 33054 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TREA (X) Change () Addition
Name: WALKER, MICHELLE L
Address: 2411 NW 65 STREET
City-St-Zip: MIAMI, FL 33147 US

Title: PARL (X) Change () Addition
Name: DAVIS-SMITH, KIMBERLY
Address: 562 NW 46 ST
City-St-Zip: MIAMI, FL 33127 US

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: LEOLA K. WALKER

P

01/09/2004

Electronic Signature of Signing Officer or Director

Date