2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2004
Secretary of State

DOCUMENT# N03000009342

Entity Name: FIRST PRESBYTERIAN PRESCHOOL OF DELRAY, INC.

Current Principal Place of Business:

33 GLEASON STREET
DELRAY BEACH, FL 33483

New Principal Place of Business:

Current Mailing Address:

33 GLEASON STREET
DELRAY BEACH, FL 33483

New Mailing Address:

FEI Number: 20-0412019 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, KATHY
33 GLEASON STREET
DELRAY BEACH, FL 33483 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: SMITH, KATHY
Address: 33 GLEASON STREET
City-St-Zip: DELRAY BEACH, FL 33483

Title: D ( ) Delete
Name: BEVERIDGE, MERRILL
Address: 33 GLEASON STREET
City-St-Zip: DELRAY BEACH, FL 33483

Title: D ( ) Delete
Name: GARNETT, JO
Address: 33 GLEASON STREET
City-St-Zip: DELRAY BEACH, FL 33483

Title: D ( ) Delete
Name: HINCHLIFFE, DAN
Address: 33 GLEASON STREET
City-St-Zip: DELRAY BEACH, FL 33483

Title: D ( ) Delete
Name: PEARSON, ANNE
Address: 33 GLEASON STREET
City-St-Zip: DELRAY BEACH, FL 33483

Title: D ( ) Delete
Name: MULLIN, SUSAN
Address: 33 GLEASON STREET
City-St-Zip: DELRAY BEACH, FL 33483

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:

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: DAN HINCHLIFFE D 01/23/2004

Electronic Signature of Signing Officer or Director — Date

FRED WALKER
33 GLEASON STREET
DELRAY BEACH, FL 33483