

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007408

FILED  
Mar 23, 2005  
Secretary of State

Entity Name: SERVE THOSE AT RISK, INC.

**Current Principal Place of Business:**

1101 PONTE VEDRA BOULEVARD  
PONTE VEDRA, FL 32082

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1428  
PONTE VEDRA, FL 320041428

**New Mailing Address:**

FEI Number: 38-3705329      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STUART, JANE DAY  
1101 PONTE VEDRA BOULEVARD  
PONTE VEDRA, FL 32082      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: STUART, JANE DAY  
Address: 1101 PONTE VEDRA BOULEVARD  
City-St-Zip: PONTE VEDRA, FL 32082

Title: D      ( ) Delete  
Name: SIEGEL, JESSIC G  
Address: 1101 PONTE VEDRA BOULEVARD  
City-St-Zip: PONTE VEDRA, FL 32082

Title: D      ( ) Delete  
Name: REDEL, DONNA  
Address: 180 EAST 79TH STREET, APT. 12G  
City-St-Zip: NEW YORK, NY 10021

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D      (X) Change ( ) Addition  
Name: SIEGEL, JESSICA G  
Address: 1101 PONTE VEDRA BOULEVARD  
City-St-Zip: PONTE VEDRA, FL 32082

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: JANE DAY STUART

D

03/23/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date