

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2004 8:00 am
Secretary of State

03-05-2004 90022 021 ****70.00

DOCUMENT # N04224 1. Entity Name THE ARTHRITIS RESEARCH INSTITUTE OF AMERICA, INC.					
Principal Place of Business % BETTY HALL 300 S DUNCAN AVE #240 CLEARWATER, FL 33755			Mailing Address % BETTY HALL 300 S DUNCAN AVE #240 CLEARWATER, FL 33755		
2. Principal Place of Business Suite, Apt. #, etc. 300 S Duncan Ave #240			3. Mailing Address Suite, Apt. #, etc. 300 S Duncan Ave #240		
City & State Clearwater, FL			City & State Clearwater, FL		
Zip 33755		Country 		4. FEI Number 59-2438325	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent DEW, MICHELE B 300 S. DUNCAN AVE., STE. 240 CLEARWATER, FL 33755					
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code					
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u><i>Michelle B. Dew, Executive Director</i></u> DATE: <u>2/23/04</u> (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$81.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BARRETT, JOHN P. JR. 1911 COVE LANE CLEARWATER, FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Brian Burke 300 S Duncan Ave #240 Clearwater, FL 33755	☐ Change ☒ Addition Director	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD BROWN, PETER R. 300 S. DUNCAN AVE. #240 CLEARWATER, FL 33755	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Rick James 300 S Duncan Ave #240 Clearwater, FL 33755	☐ Change ☒ Addition Director	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T UMBERG, PAUL 286 PINE RD BELLEAIT, FL 33756	TITLE NAME STREET ADDRESS CITY-ST-ZIP	David Mulock 300 S Duncan Ave #240 Clearwater, FL 33755	☐ Change ☒ Addition Director	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Dew BARRETT, MICHELLE B 420 W DAVID RD 300 S Duncan Ave #240 CLEARWATER, FL 33755	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Dew, Michele B 300 S Duncan Ave #240 Clearwater, FL 33755	☒ Change ☐ Addition director	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HALL, BETTY JEAN 300 SO DUNCAN AVE #240 CLEARWATER, FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Frank Knaubson 300 S Duncan Ave #240 Clearwater, FL 33755	☐ Change ☒ Addition director	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BABB, JOHN 300 S. DUNCAN AVE. #240 CLEARWATER, FL 33755	TITLE NAME STREET ADDRESS CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Michelle B. Dew</i></u> Michelle B Dew, 2/23/04 461-4054 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

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