

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07930

FILED  
Aug 24, 2004  
Secretary of State

**Entity Name:** SOUTH FLORIDA SCIENCE FICTION SOCIETY, INC.

**Current Principal Place of Business:**

P.O. BOX 70143  
FORT LAUDERDALE, FL 33307 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 70143  
FORT LAUDERDALE, FL 33307 US

**New Mailing Address:**

**FEI Number:** 59-2575665      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

PETERSON, GEORGE  
202 LAKE POINTE DR  
APT 20  
FORT LAUDERDALE, FL 33309

**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: PD ( ) Delete  
Name: PETERSON, GEORGE  
Address: 202 LAKE POINTE DR APT 20  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: SD ( ) Delete  
Name: HERZ, MELANIE  
Address: 2517 MANOR DR NE  
City-St-Zip: PALM BAY, FL 329053142

Title: PD ( ) Delete  
Name: CASTRO, JUDI  
Address: 7670 SW 152ND AVE APT 106  
City-St-Zip: MIAMI, FL 331931131

Title: TD ( ) Delete  
Name: HERZ, MELANIE  
Address: 2517 MANOR DR NE  
City-St-Zip: PALM BAY, FL 32905

**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:

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: MELANIE HERZ

TD

08/24/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date