2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

Secretary of State DOCUMENT # N08126 01-26-2004 90003 045 ****61.25 HUMAN RIGHTS FOUNDATION, INC. Principal Place of Business Mailing Address 1240 NW 21ST AVE. 1240 NW 21ST AVE. 54000456 GAINESVILLE, FL 32609 GAINESVILLE, FL 32609 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 01202004 Cha-NP CR2E037 (10/03) City & State City & State 4. FEI Number 59-2550906 Applied For Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BARR, CHRISTINE 2420 W SB/235 BROOKER, FL 32622 Gaineouille 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. (NOTE; Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be \Box Due by May 1, 2004 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ΡŊ TIT! F ☐ Addition ☐ Delete TITLE Thomas Pernice SCOTT, JOAN NAME NAME 10134 SW 17 - Place STREET ADDRESS 4203 NW 67TH TERRACE STREET ADDRESS CITY-ST-7IP GAINESVILLE, FL 32606 CITY-ST-ZIP ☐ Addition ☐ Change Defete TITLE TITLE KAUFFMAN, DAVID NAME STREET ADDRESS STREET ACKNORESS 3745 NW 7TH AVENUE CITY-ST-ZIP CITY-ST-ZIP GAINESVILLE, FL 32608 De ete ☐ Change ☐ Addition TITLE BARR, CHRISTINE NAME NAME 2420 W SR 235 STREET ADDRESS STREET ADORESS CITY-ST-ZIP BOOKER, FL CITY-ST-ZIP TITLE sec D ☐ Delete TIT! F ☐ Change ☐ Addition Tandy Carnes 7711 S.W. 1845 Place NAME STREET ADDRESS STREET ADDRESS Dainesville, Fl. 32607 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete ☐ Change Richard Kelley 18346 nw 3944 Place NAME NAME STREET ADDRESS STREET ADDRESS newberry, F1. 33669 CITY-ST-ZIP CITY-ST-ZIP D Richard Kohl TITLE TITLE Change Addition NAME NAME 16008 nw 784 averal STREET ADDRESS STREET ADDRESS alackue, 71. 32615 CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I turther 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.

FILED

Jan 26, 2004 8:00 am

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