

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2004 8:00 am
Secretary of State

04-07-2004 90014 013 ****61.25

DOCUMENT # N18519 1. Entity Name FOUNDATION FOR SCIENCE AND SPIRITUALITY, INC.					
Principal Place of Business 1001 U.S. HIGHWAY ONE SUITE 800 JUPITER, FL 33477 US			Mailing Address 1001 U.S. HIGHWAY ONE SUITE 800 JUPITER, FL 33477 US		
2. Principal Place of Business 3801 PGA BOULEVARD Suite, Apt. #, etc. SUITE 555 City & State PALM BEACH GARDENS, FL Zip 33410 Country USA			3. Mailing Address 3801 PGA BOULEVARD Suite, Apt. #, etc. SUITE 555 City & State PALM BEACH GARDENS, FL Zip 33410 Country USA		
4. FEI Number 59-2780096			Applied For Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent WILSON, HUNTER S 1001 U.S. HIGHWAY ONE 3801 PGA BLVD, SUITE 555 SUITE 800 PALM BEACH GARDENS, FL JUPITER, FL 33477 33410			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	D PERRY, HENRY A. 1001 U.S. HIGHWAY ONE SUITE 800 JUPITER, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3801 PGA BLVD., SUITE 555 PALM BEACH GARDENS, FL 33410	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YOUNG, SUSAN 11699 RITTENHOUSE RD MARYSVILLE, OH 43040	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST WILSON, HUNTER S 1001 U.S. HWY 1 STE 800 JUPITER, FL 33477	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3801 PGA BLVD, SUITE 555 PALM BEACH GARDENS, FL 33410	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: 			Date 4-1-04 Daytime Phone #		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					