

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24728

FILED
Apr 30, 2004
Secretary of State**Entity Name:** EPISCOPAL MENTAL HEALTH MINISTRIES, INC.**Current Principal Place of Business:**101 NE FIRST ST
POMPANO BEACH, FL 33060 US**New Principal Place of Business:**1698 BLOUNT ROAD
POMPANO BEACH, FL 33069 US**Current Mailing Address:**101 NE FIRST ST
POMPANO BEACH, FL 33060 US**New Mailing Address:**1698 BLOUNT ROAD
POMPANO BEACH, FL 33069 US**FEI Number:** 65-0133444**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**RICKER, MARY LOU
4231 NE 27 AVE
LIGHTHOUSE POINT, FL 33064 US**Name and Address of New Registered Agent:**BASS, KATHY
4161 SW 7TH STREET
PLANTATION, FL 33317 US

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: KATHY BASS

04/30/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: HAGEMAN, ROBERT
Address: 899 SW 15 STREET
City-St-Zip: BOCA RATON, FL 33486

Title: S () Delete
Name: ENGSKON, JOAN
Address: 2709 OAK TERR DRIVE
City-St-Zip: OAKLAND PARK, FL 33309 US

Title: PD () Delete
Name: RICKER, MARY LOU
Address: 4231 N E 27TH AVENUE
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: MD () Delete
Name: BATES, DIANNE L
Address: 8015 SW 22ND COURT
City-St-Zip: DAVIE, FL 33324

Title: VD () Delete
Name: BASS, KATHY
Address: 4161 SW 7TH STREET
City-St-Zip: PLANTATION, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VD (X) Change () Addition
Name: RICKER, MARY LOU
Address: 4231 N E 27TH AVENUE
City-St-Zip: LIGHTHOUSE POINT, FL 33064

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

Title: PD (X) Change () Addition
Name: BASS, KATHY
Address: 4161 SW 7TH STREET
City-St-Zip: PLANTATION, FL 33317

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: KATHY BASS

PD

04/30/2004

Electronic Signature of Signing Officer or Director

Date