

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26954

Entity Name: DRUG FREE, INC.

FILED
Apr 30, 2004
Secretary of State

Current Principal Place of Business:

RYAN'S RESTAURANT
LEESBURG, FL 34748 US

New Principal Place of Business:

107 W. MAIN STREET
TAVARES, FL 32778 US

Current Mailing Address:

P.O. BOX 493451
LEESBURG, FL 34748 US

New Mailing Address:

P.O. BOX 491033
LEESBURG, FL 34749 US

FEI Number: 59-2962440

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLEISHER, AMELIA R
1219 PALMETTO DR
LADY LAKE, FL 32159

Name and Address of New Registered Agent:

MITCHELL, RUBY
6721 FERN CIRCLE
LEESBURG, FL 34748

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: RUBY MITCHELL

04/30/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROBERTSON, CLIFFORD B
Address: 520 JASON ST
City-St-Zip: LADY LAKE, FL 32159

Title: VD () Delete
Name: IDELL, H C
Address: 115 E. MAGNOLIA AVE.
City-St-Zip: LEESBURG, FL 34748

Title: SD () Delete
Name: HOOD, MARIYLN
Address: 306 SOUTH OLD DIXIE HWY
City-St-Zip: LADY LAKE, FL 32159

Title: TD () Delete
Name: FLEISHER, AMELI R
Address: 1219 PALMETOO DR.
City-St-Zip: LADY LAKE, FL 32159

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MITCHELL, RUBY
Address: 6721 FERN CIRCLE
City-St-Zip: LEESBURG, FL 34748

Title: VD (X) Change () Addition
Name: MITCHELL, PERNELL
Address: 115 E. MAGNOLIA AVE.
City-St-Zip: LEESBURG, FL 34748

Title: SD (X) Change () Addition
Name: JACKSON, JOHNNIE
Address: 1106 LUCAS STREET
City-St-Zip: LEESBURG, FL 34748

Title: TD (X) Change () Addition
Name: BRIEN, BOWERS
Address: 202 WATERS EDGE DRIVE
City-St-Zip: LEESBURG, FL 34748

Title: D () Change (X) Addition
Name: JACOBSEN, JOANNE
Address: 511 LAKESHORE
City-St-Zip: LEESBURG, FL 34748

Title: D () Change (X) Addition
Name: SHAW, JEFFERY
Address: 5465NW 8TH PLACE
City-St-Zip: OCALA, FL 34482

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: RUBY MITCHELL

P

04/30/2004

Electronic Signature of Signing Officer or Director

Date