2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 27, 2004 8:00 am Secretary of State

THE LAN	JMENT # N35143 MENT # N35143 MENT # N35143	ION, INC.			•	04-27-2004	4 90076 (013 ****	61.25
12505 ORA STE 906	ce of Business INGE DRIVE ERDALE, FL 33330 US	Mailing Address 12505 ORANGE DRIVE STE 906 FORT LAUDERDALE, FL	33330 US				34	U D 0 4	46
		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		02052004 C	hg-NP	CR2E03	37 (10/03)	
City & Sta	ate	City & State	···		4. FEI Number 65-019683	32			pplied For ot Applicable
Zip	Country	Zip	Country		5. Certificate of S			\$8.75 Ad	ditional
	6. Name and Address of Current Ro	egistered Agent		<u>F</u>	7. Name and Add	iress of New F	Registered /	·	
			Name						
POFFENBARGER, MARK C/O CENTURY MANAGEMENT SERVICES,INC 12505 ORANGE DRIVE, STE 906		S,INC	Street Address		(P.O. Box Number is Not Acceptable)				
	UDERDALE, FL 33330								
,			City					Zip Cod	ie
4.							FL	• ′	
B. The abov	e named entity submits this statement for t	he purpose of changing its r	eaistered office or	realetore	ad adopt or both in				
SIGNATURE		<i>f</i>			3/3	1/04	onda. Fam	aarimar wiiri	, and accept
,	110000	J	Registered Agent signatu		3/3	1/04	DATE	aarimar wiiri	, and accept
,	- Mento	J	Registered Agent signatu	ure required v	3/3	1/04		k payable:	······································
,	Stgnature, type or printed name of register conformation Filling Fee is \$61.25	9. Election Cam Trust Fund Co	Registered Agent signatu	ure required v	when reinstating)	1/0 4 Flor	DATE Make checi rida Depar	k payable: tment of S	io ,
SIGNATURE 10. Tille	Signature, types or printed name of register or gent and Filling Fee is \$61.25 Due by May 1, 2004 OFFICERS AND DIRE	9. Election Cam Trust Fund Co	Registered Agent signature paign Financing ontribution. 11. TITLE	ure required v	when reinstating) \$5.00 May Be Added to Fees	1/0 4 Flor	DATE Make checi rida Depar	k payable: tment of S	io ,
SIGNATURE 10. TITLE NAME	Signature, types or printed name of registered genutino Filling Fee is \$61.25 Due by May 1, 2004 OFFICERS AND DIRE VPD STARBUCK, DONALD	9. Election Cam Trust Fund Co	Registered Agent signature paign Financing ontribution. 11. TITLE NAME	ure required v	when reinstating) \$5.00 May Be Added to Fees	1/0 4 Flor	DATE Make checi rida Depar	k payable Iment of S	itate
SIGNATURE 10. TITLE NAME STREET ADDRESS	Signature, types or printed name of registered genutino Filling Fee is \$61.25 Due by May 1, 2004 OFFICERS AND DIRE VPD STARBUCK, DONALD 10516 SW 12 MANOR	9. Election Cam Trust Fund Co	Registered Agent signature paign Financing ontribution. 11. TITLE NAME STREET ADDRESS	ure required v	when reinstating) \$5.00 May Be Added to Fees	1/0 4 Flor	DATE Make checi rida Depar	k payable Iment of S	itate
SIGNATURE 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, types or printed name of register or gent and Filling Fee is \$61.25 Due by May 1, 2004 OFFICERS AND DIRE VPD STARBUCK, DONALD 10516 SW 12 MANOR PEMBROKE PINES, FL	9. Election Cam Trust Fund Co	Registered Agent signature paign Financing ontribution. 11. TITLE NAME STREET ADDRESS CITY-ST-2IP	ure required v	when reinstating) \$5.00 May Be Added to Fees	1/0 4 Flor	DATE Make checi rida Depar	k payable. Iment of S RECTORS II	itate N 10
SIGNATURE 10. TITLE NAME STREET ADDRESS	Signature, types or printed name of registered genutino Filling Fee is \$61.25 Due by May 1, 2004 OFFICERS AND DIRE VPD STARBUCK, DONALD 10516 SW 12 MANOR	9. Election Cam Trust Fund Co	Registered Agent signature paign Financing pontribution. 11. TITLE NAME STREET ADDRESS CiTY-ST-2IP TITLE	ure required v	when reinstating) \$5.00 May Be Added to Fees	1/0 4 Flor	DATE Make checi rida Depar	k payable Iment of S	itate
SIGNATURE 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, types or printed name of register compensation. Filling Fee is \$61.25 Due by May 1, 2004 OFFICERS AND DIRE VPD STARBUCK, DONALD 10516 SW 12 MANOR PEMBROKE PINES, FL PD FORCUCCI, CHARLES	9. Election Cam Trust Fund Co	Registered Agent signature paign Financing patribution. 11. TITLE NAME STREET ADDRESS CITY-ST-2IP	ure required v	when reinstating) \$5.00 May Be Added to Fees	1/0 4 Flor	DATE Make checi rida Depar	k payable. Iment of S RECTORS II	itate N 10
SIGNATURE 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, types or printed name of register or spent and printed name	9. Election Cam Trust Fund Co	Registered Agent signature paign Financing ontribution. 11. TITLE NAME STREET ADDRESS CiTy-ST-ZIP TITLE NAME	ure required v	when reinstating) \$5.00 May Be Added to Fees	1/0 4 Flor	DATE Make checi rida Depar	k payable. Iment of S RECTORS II	itate N 10
SIGNATURE 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, types or printed name of register or spenusive. Filling Fee is \$61.25 Due by May 1, 2004 OFFICERS AND DIRE VPD STARBUCK, DONALD 10516 SW 12 MANOR PEMBROKE PINES, FL PD FORCUCCI, CHARLES 10299 SW 16TH ST	9. Election Cam Trust Fund Co	Registered Agent signature paign Financing ontribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	ure required v	when reinstating) \$5.00 May Be Added to Fees	1/0 4 Flor	DATE Make checi rida Depar	k payable. Iment of S RECTORS II	itate N 10
SIGNATURE 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, types of printed name of register of spenus for the policy of	9. Election Cam Trust Fund Co	Registered Agent signature paign Financing ontribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME	ure required v	when reinstating) \$5.00 May Be Added to Fees	1/0 4 Flor	DATE Make checi rida Depar	k payable. Iment of S RECTORS II Change	itate N 10 Addition
SIGNATURE 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Signature, type of printed name of register to at gent before the second of the second	9. Election Cam Trust Fund Co	Registered Agent signature paign Financing ontribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	ure required v	when reinstating) \$5.00 May Be Added to Fees	1/0 4 Flor	DATE Make checi rida Depar	k payable. Iment of S RECTORS II Change	itate N 10 Addition
SIGNATURE 10. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP	Signature, types or printed name of register content for the second of t	9. Election Cam Trust Fund Co	Registered Agent signature paign Financing ontribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	A	when reinstating) \$5.00 May Be Added to Fees	1/0 4 Flor	DATE Make checi rida Depar	k payable thent of S RECTORS II Change Change	itate N 10 Addition Addition
SIGNATURE 10. TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP	Signature, types or printed name of register content for the second of t	9. Election Cam Trust Fund Co	Registered Agent signature paign Financing ontribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	A	\$5.00 May Be Added to Fees DDITIONS/CHANG	Floi	DATE Make check rida Depar RS AND DII	k payable thent of S RECTORS II Change Change	itate N 10 Addition
SIGNATURE 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, type or printed name of register to atgent the filling Fee is \$61.25 Due by May 1, 2004 OFFICERS AND DIRE VPD STARBUCK, DONALD 10516 SW 12 MANOR PEMBROKE PINES, FL PD FORCUCCI, CHARLES 10299 SW 16TH ST HOLLYWOOD, FL 33025 TD BROWNE, MICHELE BRAVO 4245 UNIVERSITY DR SUNRISE, FL 33351 D KLAUSENBERG, JEANETTE	9. Election Cam Trust Fund Co	Registered Agent signature paign Financing ontribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	A	when reinstating) \$5.00 May Be Added to Fees	Floi	DATE Make check rida Depar RS AND DII	k payable thent of S RECTORS II Change Change	to state N 10 Addition Addition
SIGNATURE 10. TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP	Signature, type or printed name of register to at gent before the second of the second	9. Election Cam Trust Fund Co	Registered Agent signature paign Financing ontribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	A	\$5.00 May Be Added to Fees DDITIONS/CHANG	Floi	DATE Make check rida Depar RS AND DII	k payable thent of S RECTORS II Change Change	to state N 10 Addition Addition
SIGNATURE 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, type or printed name of register to at gent before by May 1, 2004 OFFICERS AND DIRE VPD STARBUCK, DONALD 10516 SW 12 MANOR PEMBROKE PINES, FL PD FORCUCCI, CHARLES 10299 SW 16TH ST HOLLYWOOD, FL 33025 TD BROWNE, MICHELE BRAVO 4245 UNIVERSITY DR SUNRISE, FL 33351 D KLAUSENBERG, JEANETTE 1110 SW 103RD AVE	9. Election Cam Trust Fund Co	Registered Agent signature paign Financing ontribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	A	\$5.00 May Be Added to Fees DDITIONS/CHANG	Floi	DATE Make check rida Depar RS AND DII	k payable thent of S RECTORS II Change Change	itate N 10 Addition 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.

NAME

STREET ADDRESS

STREET ADORESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

3/10/04 954-4

934-454-635

☐ Change

■ Addition