2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# N45771

Entity Name: EAST CENTRAL DIETETIC ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 536217
ORLANDO, FL 328536217

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 536217
ORLANDO, FL 328536217

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AMMON, LINDA
13640 LK MARY JANE ROAD
ORLANDO, FL 32832 US

Name and Address of New Registered Agent:

CARPENTER, MARY LU
1008 QUAKER RIDGE COURT
OVIEDO, FL 32765 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: MARY LU CARPETER 04/30/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SULLIVAN, MARY ANN
Address: 3202 WEST ORANGE COUNTY CLUB
City-St-Zip: WINTER GARDEN, FL 34787

Title: PD (X) Delete
Name: MCKEE, JANET
Address: 510 LAKE AVE
City-St-Zip: ORLANDO, FL 32801

Title: T ( ) Delete
Name: LINDSAY, AMY
Address: 3172 FLOREL WAY EAST
City-St-Zip: APOPKA, FL 32703

Title: SD ( ) Delete
Name: ROMEO, BARBARA
Address: 3231 HEATHER BROOK CT
City-St-Zip: WINTER PARK, FL 32792

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GEISE, TARA
Address: FLORIDA HOSPITAL CELEBRATION
City-St-Zip: CELEBRATION, FL

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

Title: T (X) Change ( ) Addition
Name: CARPENTER, MARY LU
Address: 1008 QUAKER RIDGE COURT
City-St-Zip: OVIEDO, FL 32765

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

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: MARY LU CARPENTER T 04/30/2004
Electronic Signature of Signing Officer or Director Date