2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50263

FILED May 04, 2004 Secretary of State

Entity Name: EVERGLADES RESTORATION MOVEMENT INC.

Current Principal Place of Business: New Principal Place of Business: 2205 NW 30TH PLACE POMPANO BEACH, FL 33069 **Current Mailing Address: New Mailing Address:** 2205 NW 30TH PLACE POMPANO BEACH, FL 33069 FEI Number: 65-0355074 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCCUNE, DON MURCH, CHRIS CEO 2205 NW 30 PL 1275 SW 46 AVE **APT 409** POMPANO BEACH, FL 33069 US POMPANO BEACH, FL 33069 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: CHRIS MURCH 05/04/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition MCBRIDE, JOHN MCCUNE, DON Name: Name: 633 SIESTA KEY CIRCLE Address: 9906 HARBOR INN DR. Address: DEERFIELD, FL 33441 City-St-Zip: City-St-Zip: CORAL SPRINGS, FL 33071 US Title: () Delete Title: () Change () Addition RODGERS, JONATHAN Name: Name: Address: 4721 LINCOLN STREET Address: City-St-Zip: HOLLYWOOD, FL 33021 City-St-Zip: Title: () Delete Title: () Change () Addition TOOLE, BUDDY Name: Name: 11250 ORANGE DR Address: Address: City-St-Zip: **DAVIE. FL 33330** City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: SMITH, CARL S Name: LONG, TIFFANY 6039 NW 16TH CT Address: Address: 906 HARBOR INN DR City-St-Zip: MARGATE, FL 33063 City-St-Zip: CORAL SPRINGS, FL 33071 US Title: (X) Delete Title: () Change () Addition MURCH, CHRIS Name: Name: 11321 NW 40 ST Address: Address: CORAL SPRINGS, FL 33065 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition DUNAGEN, JUDD Name: Name: Address: 1296 SW 4TH TERR Address:

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.

City-St-Zip:

SIGNATURE: CHRIS MURCH CEO 05/04/2004

POMPANO BEACH, FL 33060

City-St-Zip: