


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 26, 2004 08:00 AM  
Secretary of State

DOCUMENT # N92000000483 1. Entity Name PROBATIONER'S EDUCATIONAL GROWTH ADVISORY COUNCIL, INC.	
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Principal Place of Business 7817 CONGRESS STREET NEW PORT RICHEY, FL 34653 US	Mailing Address 7817 CONGRESS STREET NEW PORT RICHEY, FL 34653 US
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04202004 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3192064	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  GLASS, BRENDA J 7817 CONGRESS STREET NEW PORT RICHEY, FL 34653
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**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

U000000132526  
04/27/04-80049-022 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TEPPER, JUDGE L 38053 LIVE OAK AVE RM 106C DADE CITY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD REYES, ADEY 8620 GALEN WILSON BLVD PORT RICHEY, FL 34668
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JENKINS-BROWN, SALATHEIA 26 E. UNIVERSITY AVE GAINESVILLE, FL 32601
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ED GLASS, BRENDA 7817 CONGRESS STREET NEW PORT RICHEY, FL 34653
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JENKINS, DALE 3209 VIRGINIA AVENUE FORT PIERCE, FL 34981
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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.

**SIGNATURE:**  Brenda J. Glass, Exec Director 4/21/04 727-264-01  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #