

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001255

FILED
May 07, 2004
Secretary of State**Entity Name:** AFP FLORIDA FIRST COAST CHAPTER, INC.**Current Principal Place of Business:**P.O. BOX 43024
JACKSONVILLE, FL 32203 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 43024
JACKSONVILLE, FL 32203 US**New Mailing Address:****FEI Number:** 59-2759167**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GREMADIER, COLLINS, MENDER & HOWARD
4655 SALISBURY RD
STE 300
JACKSONVILLE, FL 32256 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: SCHAAN, BETH C
Address: 836 PRUDENTIAL DR., #1205
City-St-Zip: JACKSONVILLE, FL 32207

Title: PD () Delete
Name: GRABOWSKI, RODNEY M
Address: 4567 ST. JOHNS BLUFF ROAD, S.
City-St-Zip: JACKSONVILLE, FL 32217

Title: PP () Delete
Name: SPALTEN, MARLENE M
Address: 7400 SAN JOSE BLVD.
City-St-Zip: JACKSONVILLE, FL 32217

Title: VPM () Delete
Name: IRVIN, JANET
Address: 4911 SPRING PARK RD.
City-St-Zip: JACKSONVILLE, FL 32207

Title: T () Delete
Name: STUBBLEFIELD, DARBY
Address: 4250 LAKESIDE DRIVE, SUITE 204
City-St-Zip: JACKSONVILLE, FL 32210

Title: VD () Delete
Name: PATZ, MELANIE
Address: HUBBARD HOUSE, INC.
City-St-Zip: JACKSONVILLE, FL 32201

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: AD (X) Change () Addition
Name: FRAMPTON, JANET
Address: 2800 UNIVERSITY BOULEVARD N
City-St-Zip: JACKSONVILLE, FL 32211

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: JANET S. FRAMPTON

AD

05/07/2004

Electronic Signature of Signing Officer or Director

Date