2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004
Secretary of State

DOCUMENT# N93000003554

Entity Name: PEOPLE'S ADVOCACY CENTER FOR TRAINING, INC.

Current Principal Place of Business:

579 E CALL ST
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

579 E CALL ST
TALLAHASSEE, FL 32301 US

New Mailing Address:

FEI Number: 59-3195635 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WOODALL, KAREN
579 E CALL ST
TALLAHASSEE, FL 32301 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: VD ( ) Delete
Name: ROMO, MARGARITA
Address: 37240 LOCKE ST
City-St-Zip: DADE CITY, FL

Title: D ( ) Delete
Name: FORD, CAROLYN FR
Address: 527 KEY ST.
City-St-Zip: QUNICY, FL 32351

Title: D ( ) Delete
Name: BLOCK, LANCE
Address: 2139 PALM BEACH LKAES BLVD
City-St-Zip: WEST PALM BEACH, FL 33409

Title: PD ( ) Delete
Name: WOODALL, KAREN
Address: 579 E CALL ST
City-St-Zip: TALLAHASSEE, FL

Title: ST ( ) Delete
Name: GILBERG, BARBARA D
Address: 1529 COLONIAL
City-St-Zip: TALLAHASSEE, FL 32303

Title: D ( ) Delete
Name: DAVIS, ANITA
Address: 708 BRAGG STREET
City-St-Zip: TALLAHASSEE, FL 32310

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change ( ) Addition
Name: ROMO, MARGARITA
Address: 37240 LOCKE ST
City-St-Zip: DADE CITY, FL 33523

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: ST (X) Change ( ) Addition
Name: DEVANE, BARBARA D
Address: 513 E. CALL ST.
City-St-Zip: TALLAHASSEE, FL 32301

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: KAREN WOODALL PRES 04/05/2004

Electronic Signature of Signing Officer or Director — Date