2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003582

FILED Apr 27, 2004 Secretary of State

Entity Name: FOUNDATION FOR THE ADVANCEMENT OF MESOAMERICAN STUDIES, INC.

Current Principal Place of Business: New Principal Place of Business: 268 SOUTH SUNCOAST BLVD CRYSTAL RIVER, FL 34429 **Current Mailing Address: New Mailing Address:** 268 SOUTH SUNCOAST BLVD CRYSTAL RIVER, FL 34429 FEI Number: 59-3195520 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: THE PRENTICE HALL CORPORATION SYSTEM, INC. 1201 HAYES STREET, SUITE 105 TALLAHASSEE, FL 32301 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete KERR, BARBARA Name: Name: 14 WEST 17TH STREET APT 2S Address: Address: City-St-Zip: NEW YORK, NY 10011 City-St-Zip: Title: Title: () Delete () Change () Addition Name: KERR, JUSTIN Name: Address: 14 WEST 17TH STREET APT 2S Address: City-St-Zip: NEW YORK, NY 10011 City-St-Zip: Title: Title: () Change () Addition () Delete DIEHL, DICK Name: Name: 1214 WAKEFIELD DRIVE Address: Address: City-St-Zip: TUSCALOOSA, AL 35405 City-St-Zip: Title: DT () Delete Title: () Change () Addition Name: BARBERA, ELIZABETH Name: 1736 DANNET PLACE Address: Address: City-St-Zip: EAST MEADOW, NY 11554 City-St-Zip: Title: EDS () Delete Title: () Change () Addition NOBLE, SANDRA DR Name: Name: 10976 COVE HARBOR DRIVE Address: Address: City-St-Zip: CRYSTAL RIVER, FL 34428 City-St-Zip: Title: () Delete Title: () Change () Addition REENTS-BUDET, DORIE Name: Name: Address: 27 CHESTNUT BLUFF LANE Address: DURHAM, NC 27713 City-St-Zip: 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: ELIZABETH BARBERA T 04/27/2004

MARGARET RANIERI, DV C/O 50 CHARLES LINDBERGH BLVD., STE 500 UNIONDALE, NY 11553

LEWIS S. RANIERI, DCP C/O 50 CHARLES LINDBERGH BLVD., STE 500 UNIONDALE, NY 11553