2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2004
Secretary of State

DOCUMENT# N94000000416

Entity Name: JIM RUTLEDGE SARCOMA CANCER RESEARCH FUND, INC.

Current Principal Place of Business:

1257 SNELL ISLE BLVD. N.E.
ST PETERSBURG, FL 33704 US

New Principal Place of Business:

Current Mailing Address:

1257 SNELL ISLE BLVD., N.E.
ST PETERSBURG, FL 33704 US

New Mailing Address:

FEI Number: 59-3230168 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RUTLEDGE, J. MARK
1257 SNELL ISLE BLVD. N.E.
ST PETERSBURG, FL 33704 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:	PD	( ) Delete
Name:	RUTLEDGE, J. MARK	
Address:	1257 SNELL ISLE BLVD N.E.	
City-St-Zip:	SAINT PETERSBURG, FL 33704	
Title:	SD	( ) Delete
Name:	RUTLEDGE, MANDY	
Address:	1257 SNELL ISLE BLVD. N.E.	
City-St-Zip:	SAINT PETERSBURG, FL 33704	
Title:	VD	( ) Delete
Name:	RUTLEDGE, SANDRA	
Address:	2283 HERON CIRCLE	
City-St-Zip:	CLEARWATER, FL 33762	
Title:	VD	( ) Delete
Name:	GODING, CINDY	
Address:	3408 W PALMIRA AVE	
City-St-Zip:	TAMPA, FL 33629	
Title:	TD	( ) Delete
Name:	GODING, JON	
Address:	3408 W PALMIRA AVE	
City-St-Zip:	TAMPA, FL 33629	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VD	(X) Change ( ) Addition
Name:	RUTLEDGE, SANDRA	
Address:	P.O. BOX 5325	
City-St-Zip:	MT. CRESTED BUTTE, CO 81225	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
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: JAMES MARK RUTLEDGE PD 01/25/2004

Electronic Signature of Signing Officer or Director — Date