2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002032

Entity Name: MARGARITE BATEASE FUND, INC.

FILED Mar 28, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

7301 W PALMMETTO PK RD 7301 W PALMMETTO PK RD

104-B 101-A

BOCA RATON, FL 33433 US BOCA RATON, FL 33433 US

Current Mailing Address: New Mailing Address:

7301 W. PALMETTO PARK ROAD 7301 W. PALMETTO PARK ROAD

104-B 101-A

BOCA RATON, FL 33433 BOCA RATON, FL 33433

FEI Number: 65-0483955 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:

CROWN, NANCY E P.A. CROWN, NANCY E ESQ

7301 WEST PALMETTO PARK ROAD 7301 WEST PALMETTO PARK ROAD

104-B 101-A BOCA RATON, FL 33433 US BOCA RATON, FL 33433 US

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: NANCY E. CROWN 03/28/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: DP () Delete Title: () Change () Addition

Name: BATEASE, MARGARITE Name:

 Address:
 19 R MORTON LANE
 Address:

 City-St-Zip:
 ASHEVILLE, NC 28806
 City-St-Zip:

Title: DST () Delete Title: () Change () Addition

 Name:
 CROWN, NANCY E
 Name:

 Address:
 10519 PLAINVIEW CIRCLE
 Address:

 City-St-Zip:
 BOCA RATON, FL 33433
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 WILLARD, DAWN
 Name:

 Address:
 17 OLD CHUNNS COVE ROAD, APT 1
 Address:

 City-St-Zip:
 ASHEVILLE, NC 28805
 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: NANCY E. CROWN D 03/28/2005