

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005636

FILED
Jan 06, 2004
Secretary of State**Entity Name:** THE J.D. HERRICK FOUNDATION, INC.**Current Principal Place of Business:**529 S FLAGLER DR
2H
WEST PALM BEACH, FL 33401**New Principal Place of Business:****Current Mailing Address:**529 S FLAGLER DR
2H
WEST PALM BEACH, FL 33401**New Mailing Address:****FEI Number:** 65-0534826**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**FHS CORPORATE SERVICES INC
11780 US HWY ONE
SUITE 300
NORTH PALM BEACH, FL 33408 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:** DPT () Delete
Name: HERRICK, JOHN D
Address: 529 S FLAGLER DR #2H
City-St-Zip: WEST PALM BEACH, FL 33401**Title:** D () Delete
Name: PRINCIPE, GERALD L
Address: 11780 US HWY ONE SUITE 300
City-St-Zip: NORTH PALM BEACH, FL 33408**Title:** DS () Delete
Name: PYE, DANIEL
Address: 315 LAKE DRIVE # 1 - C
City-St-Zip: WEST PALM BEACH, FL 33412**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** DS (X) Change () Addition
Name: PYE, DANIEL
Address: 1200 EAST LAKE DRIVE
City-St-Zip: FT. LAUDERDALE, FL 33316

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: JOHN D. HERRICK

PRES

01/06/2004

Electronic Signature of Signing Officer or Director_____
Date