## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # N9400006030

JOHN T. AND MARTHA A. HARTLEY FOUNDATION, INC.



Mailing Address

Principal Place of Business 1412 SOUTH RIVERSIDE DR. INDIALANTIC, FL 32903

1412 SOUTH RIVERSIDE DR. INDIALANTIC, FL 32903

## FILED Feb 04, 2004 08:00 AM Secretary of State



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01312004 No Chg-NP CR2E

CR2E037 (10/03)

4. FEI Number 59-3282508 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

BOYD, JOEL E 100 RIALTO PLACE SUITE 510 MELBOURNE, FL 32901

## DO NOT WRITE IN THIS SPACE

<ol> <li>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. I am familiar with, and accept the obligations of registered agent.</li> </ol>					
SIGNATURE Signature, typod or printed name of registered agent and title it applicable (NOTE Registered Agent signature required when reinstating)  DATE					
· · · · · · · · · · · · · · · · · · ·	Filing Fee is \$61.25 Due by May 1, 2004	Election Campalgn Finance     Trust Fund Contribution.	ing 🔲	\$5.00 May Be Added to Fees	000000034028 02/05/04-80067-008 61.25
10.	OFFICERS AND DIRE	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARTLEY, JOHN T 1412 SOUTH RIVERSIDE DR. INDIALANTIC, FL 32903				
RITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARTLEY, MARTHA A 1412 SOUTH RIVERSIDE DR. INDIALANTIC, FL 32903				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STAHEL, MELISSA A 1412 SOUTH RIVERSIDE DR. INDIALANTIC, FL 32903		-	DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SPACE
TIFLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. It hereby certify that the information supplied with this filling does not qualify 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 signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the recurrency by business empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					