2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2004
Secretary of State

DOCUMENT# N96000005047

Entity Name: FLORIDA SANDPLAY THERAPY ASSOCIATION, INC.

Current Principal Place of Business:

1612 BEACHWAY LANE
ODESSA, FL 33556

New Principal Place of Business:

Current Mailing Address:

1612 BEACHWAY LANE
ODESSA, FL 33556

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DUNN-FIERSTEIN, PATRICIA
1612 BEACHWAY LANE
ODESSA, FL 33556

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: PTD ( ) Delete
Name: DUNN-FIERSTEIN, PATRICIA
Address: 1612 BEACHWAY LANE
City-St-Zip: ODESSA, FL

Title: VD ( ) Delete
Name: FIERSTEIN, CARL
Address: 1612 BEACHWAY LANE
City-St-Zip: ODESSA, FL

Title: ST ( ) Delete
Name: RANKIN, TRUDY
Address: 215 E. BAY ST., #4
City-St-Zip: LAKELAND, FL

Title: ST ( ) Delete
Name: BERGMAN, CHRIS
Address: 15804 2ND ST.
City-St-Zip: REDINGTON BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: PATRICIA DUNN-FIERSTEIN MS. 01/21/2004

Electronic Signature of Signing Officer or Director — Date