

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 25, 2004 8:00 am**  
**Secretary of State**

02-25-2004 90063 041 \*\*\*\*61.25

**DOCUMENT # N97000001294**

1. Entity Name

PI BETA BETA FOUNDATION, INC.



Principal Place of Business

106 133 STREET EAST  
BRADENTON FL 34202

Mailing Address

P O BOX 1902  
BRADENTON FL 34206

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0741184

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THOMPSON, JOSEPH L  
106 133 STREET EAST  
BRADENTON FL 34202

Name

Street Address (P.O. Box Number is Not Acceptable)

106 133rd Street East

City  
BRADENTON

FL Zip Code  
34212

8. 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE VD ☐ Delete  
NAME EDWARDS, VAN  
STREET ADDRESS 2218 NINTH AVE. E  
CITY-ST-ZIP BRADENTON FL 34208

TITLE PD ☐ Delete  
NAME ACKERMAN, OZELL  
STREET ADDRESS 1802 2ND AVE E  
CITY-ST-ZIP PALMETTO FL 34221

TITLE SD ☐ Delete  
NAME BROWN, JAMES  
STREET ADDRESS 2439 WALKER CIR.  
CITY-ST-ZIP SARASOTA FL 34234

TITLE TD ☐ Delete  
NAME THOMPSON, JOSEPH L  
STREET ADDRESS 106 133 STREET EAST  
CITY-ST-ZIP BRADENTON FL 34202

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing 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 receiver or trustee 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.

SIGNATURE: *Joseph L. Thompson* Joseph L. Thompson 2/19/04 (941) 747-0472  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #