

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006532

FILED
Apr 27, 2004
Secretary of State**Entity Name:** FOUNDATION VILLAGE NEIGHBORHOOD FAMILY CENTER INC.**Current Principal Place of Business:**918 WOODLAWN ST.
CLEARWATER, FL 33756**New Principal Place of Business:****Current Mailing Address:**918 WOODLAWN ST.
CLEARWATER, FL 33756**New Mailing Address:****FEI Number:** 59-3480875**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**WALKER, JUDITH A
2630 PEARCE DRIVE
APT #307
CLEARWATER, FL 33764 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:** P () Delete
Name: MADELYN, EVANS
Address: 1001 OAKVIEW AVE.
City-St-Zip: CLEARWATER, FL 33756**Title:** V () Delete
Name: WEAVER, GREG
Address: 1484 S. GREENWOOD AVE., #1
City-St-Zip: CLEARWATER, FL 33756**Title:** S () Delete
Name: YOUNT, SHARON
Address: 1307 BOYLAN AVE
City-St-Zip: CLEARWATER, FL 33756**Title:** T () Delete
Name: HAYES, GLOISE
Address: 13823 NICE LANE
City-St-Zip: ODESSA, FL 33556**Title:** D () Delete
Name: PEREZ, BENJMIN
Address: 2597 COUNTRYSIDE #118
City-St-Zip: CLEARWATER, FL 33761**Title:** D () Delete
Name: PEARSON, DOROTHY
Address: 1002 MARSHALL ST
City-St-Zip: CLEARWATER, FL 33755**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
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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: MADELYN EVANS

P

04/27/2004

Electronic Signature of Signing Officer or Director

Date