2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000578

FILED Apr 28, 2004 Secretary of State

Entity Name: OPERATION SERVING CHILDREN -OSC- OPERATION SANTA CLAUS, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
4411 BEE F #217						
SARASOT	A, FL 3423325	14 US				
Current Mailing Address:			New Mailii	New Mailing Address:		
4411 BEE F #217	RIDGE RD					
SARASOT	A, FL 3423325	14 US				
FEI Number:	65-0813412	FEI Number Applied For ()	El Number Not Appli	icable () Certificate of Status Desired ()		
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:		
13466 HER	I, RICHARD A RITAGE WAY A, FL 34240	US				
	named entity s of Florida.	ubmits this statement for the purp	oose of changing it	s registered office or registered agent, or both,		
SIGNATUR	RE:					
	Electroni	c Signature of Registered Agent		Date		
OFFICERS	AND DIRECT	ORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () VANNUCCI, RICI 13466 HERITAG SARASOTA, FL	E WAY	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	BM () OWEN, JIM 5009 STURBRID SARASOTA, FL		Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	VP () VROOM, SHERF 6021 MEDICI CT SARASOTA, FL	- .	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition MIDDLETON, TRICIA 3317 S. SCHOOL AVE SARASOTA, FL 342393		
Title: Name: Address: City-St-Zip:	BD () ANGELOTTI, RIC 240 S. PINEAPP SARASOTA, FL	LE AVE	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	S () WEST, WENDY 4411 BEE RIDG SARASOTA, FL		Title: Name: Address: City-St-Zip:	()Change()Addition		
Title: Name: Address: City-St-Zip:	T () SWAIN, DARREI 1637 IDLE LN SARASOTA, FL		Title: Name: Address: City-St-Zip:	T (X) Change () Addition CAREY, MARY 2058 KINGSDOWN SARASOTA, FL 34240		

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: RICHARD VANNUCCI PRE 04/28/2004