

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001212

FILED
Mar 03, 2004
Secretary of State**Entity Name:** THE FLORIDA FOUNDATION FOR THE FUTURE, INC.**Current Principal Place of Business:**3935 ST ARMENS CIRCLE
MELBOURNE, FL 32934**New Principal Place of Business:****Current Mailing Address:**3935 ST ARMENS CIRCLE
MELBOURNE, FL 32934**New Mailing Address:**PO BOX 231
ODESSA, FL 33556**FEI Number:** 59-3544203**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**KOENIGSBERG, JAY ESQ.
1101 BRICKELL AVENUE
SUITE 800-S
MIAMI, FL 33156 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: T () Delete
Name: MASTERS, NOLAN W
Address: 3935 ST ARMENS CIR.
City-St-Zip: MELBOURNE, FL 32934

Title: PD () Delete
Name: IGELMAN, JON DR.
Address: 3935 ST AQMENS CIR.
City-St-Zip: MELBOURNE, FL 32934

Title: DEVS () Delete
Name: RAMIREZ, MARIA E
Address: 3935 ST AQMENS CIR.
City-St-Zip: MELBOURNE, FL 32934

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: FULLER & COMPANY, P., A.
Address: 2701 W BUSCH BLVD SUITE 141
City-St-Zip: TAMPA, FL 33556

Title: PD (X) Change () Addition
Name: IGELMAN, JON DR.
Address: 3935 ST ARMENS CIR.
City-St-Zip: MELBOURNE, FL 32934

Title: DEVS (X) Change () Addition
Name: RAMIREZ, MARIA E
Address: 3935 ST ARMENS CIR.
City-St-Zip: MELBOURNE, FL 32934

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: MICHAEL W FULLER

TD

03/03/2004

Electronic Signature of Signing Officer or Director

Date