

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001236

Entity Name: M. R. LEBOWITZ, INC.

FILED
Apr 15, 2004
Secretary of State

Current Principal Place of Business:

200 SANDESTIN LN.
404
DESTIN, FL 32550

New Principal Place of Business:

Current Mailing Address:

1511 WATKINS
212
NAPERVILLE, IL 60540

New Mailing Address:

FEI Number: 59-3495199

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEBOWITZ-KURTZ, MARCI R
200 SANDESTIN LN.
404
DESTIN, FL 32550 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: D () Delete
Name: ROBERTS, JEAN MRS
Address: 2767 LOGONDALE DR
City-St-Zip: ORLANDO, FL 32817

Title: T () Delete
Name: BENNETT, DENICE MRS
Address: 940 DOUGLAS AVE, 172
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: T () Delete
Name: MCCREADIE, STEVEN MR
Address: 1049 E POINT WASH. RD
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: T () Delete
Name: DUDLEY, HARRIET MRS
Address: 2410 SHADYWOOD CIRCLE
City-St-Zip: CROTON, MD 21114

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: JEAN ROBERTS

D

04/15/2004

Electronic Signature of Signing Officer or Director

Date