

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 20, 2004  
Secretary of State**

DOCUMENT# N98000002318

**Entity Name:** THE ALLEN AND CASSIE BRASWELL FOUNDATION, INC.

**Current Principal Place of Business:**

**New Principal Place of Business:**

TWO SEASIDE LANE, 102  
BELLEAIR, FL 33756

**Current Mailing Address:**

**New Mailing Address:**

TWO SEASIDE LANE, 102  
BELLEAIR, FL 33756

FEI Number: 59-3505793

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

GASSMAN, ALAN S ESQ.  
1245 COURT STREET  
SUITE 102  
CLEARWATER, FL 33756 US

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:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BRASWELL, ALLEN S SR.  
Address: TWO SEASIDE LANE, 102  
City-St-Zip: BELLEAIR, FL 33756

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Delete  
Name: BRASWELL, CASSIE  
Address: TWO SEASIDE LANE, 102  
City-St-Zip: BELLEAIR, FL 33756

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Delete  
Name: BRASWELL, BRUCE A  
Address: TWO SEASIDE LANE, 102  
City-St-Zip: BELLEAIR, FL 33756

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: ALLEN S BRASWELL

D

04/20/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date