

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002000

FILED
Jan 15, 2004
Secretary of State

Entity Name: MARGARET HARSHAW CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

809 ARCADIA COURT
MARCO ISLAND, FL 34146

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2528
MARCO ISLAND, FL 34146

New Mailing Address:

FEI Number: 59-3571856

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOODMAN, KENNETH D
3838 TAMiami TRAIL NO., STE. 300
NAPLES, FL 34103 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: BAIER, JOHN H
Address: 809 ARCADIA COURT
City-St-Zip: MARCO ISLAND, FL 34146

Title: D () Delete
Name: COLE, VINSON
Address: 1138 BROADWAY E., #3B
City-St-Zip: SEATTLE, WA 98102

Title: D () Delete
Name: BAIER, JEFFEREY
Address: 176 S COLLIER BLVD
City-St-Zip: MARCO ISLAND, FL 34145

Title: D (X) Delete
Name: ADAIR, NORRIS
Address: 720 S DEARBORN ST
City-St-Zip: CHICAGO, IL 60605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: BAIER, MARY L
Address: 3011 N. NICOLET DRIVE
City-St-Zip: GREEN BAY, WI 54311

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: JOHN BAIER

MR

01/15/2004

Electronic Signature of Signing Officer or Director

Date