

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002331

FILED
Jan 12, 2004
Secretary of State**Entity Name:** CONQUER FRAGILE X FOUNDATION, INC.**Current Principal Place of Business:**450 ROYAL PALM WAY
#400
PALM BEACH, FL 33480**New Principal Place of Business:**189 BRADLEY PLACE
ONE
PALM BEACH, FL 33480**Current Mailing Address:**450 ROYAL PALM WAY
#400
PALM BEACH, FL 33480**New Mailing Address:**189 BRADLEY PLACE
ONE
PALM BEACH, FL 33480**FEI Number:** 65-0910605**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GRIFFIN, ADRIENNE H
450 ROYAL PALM WAY
#400
PALM BEACH, FL 33480**Name and Address of New Registered Agent:**FAY, KAREN M
189 BRADLEY PLACE
ONE
PALM BEACH, FL 33480

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: KAREN M. FAY

01/12/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HARRIS, HOLLIN
Address: 450 ROYAL PALM WAY
City-St-Zip: PALM BEACH, FL 33480

Title: SD () Delete
Name: HUSTON, ADRIENNE
Address: 450 ROYAL PALM WAY
City-St-Zip: PALM BEACH, FL 33480

Title: D () Delete
Name: HOLLIN, LARRY
Address: 2036 ARCH STREET
City-St-Zip: PHILADELPHIA, PA 19103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HARRIS, HOLLIN
Address: 150 NORTH OCEAN BLVD
City-St-Zip: PALM BEACH, FL 33480

Title: SD (X) Change () Addition
Name: FAY, KAREN
Address: 189 BRADLEY PLACE
City-St-Zip: PALM BEACH, FL 33480

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: KAREN M. FAY

SD

01/12/2004

Electronic Signature of Signing Officer or Director

Date