2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

DOCUMENT # N9900004551 1. Entity Name NUZZO FAMILY FOUNDATION, INC.						Feb 04, 2004 08:00 AM Secretary of State			
Principal Place of Business 800 OCEAN DR. APT 1101 JUNO BEACH FL 33408		Mailing Address 800 OCEAN DR. APT 1101 JUNO BEACH FL 33408							31101 0 1 1038
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #. etc.		Suite, Apt. #, etc.				MOORE CR2E037 (11/03)			
City & State		City & State				4. FEI Number 22-3700343 Applied For Not Applicable			
Zip	Country			antry	5. Certificate of S		Fee Require		
6.	Name and Address of Current	Registered A	Agent		Name	7. Name and Add	iress of New Registe	ered Agent	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD.					Street Address (P.O. Box Number is Not Acceptable)				
PLANTA									
				City			FL Zip Coo	le	
8. 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. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE Signature, typed or printed name of registered agent and trie if applicable (NOTE, Registered Agent signature required when reinstating) DATE									
FILE NOW: FEE IS \$61.25 9. Election Campaign Trust Fund Contribut					inancing	\$5.00 May Be Make Check Payable to Added to Fees Florida Department of State			
10.	OFFICERS AND DIF	RECTORS		11.		ADDITIONS/CHANG	ES TO OFFICERS AN	ID DIRECTORS II	N 10
STREET ADDRESS 800 (ZO, SALVATORE J OCEAN DR APT. 1101 O BEACH FL 33408		☐ Delate			02.	U0000003461 /05/04-80090	9 □ Change -011 61.25	Addition
STREET ADDRESS 800 (ZO, LUCILLE OCEAN DR APT. 1101 O BEACH FL 33408		☐ Delele		 			☐ Change	☐ Addition
STREET ADDRESS 361	ZO, JAMES L COMMONWEALTH AVE. STNUT HILL MA 02467		☐ Delete		}			☐ Change	Addition
STREET ADDRESS 1530 CITY-ST-ZIP PHIL	ZO, DAVID R) LOCUST STAPT 15B .ADELPHIA PA 19102	****	☐ Detete	1	}			☐ Change	☐ Addition
STREET ADDRESS LUMI	ZO, THOMAS S LONDONDERRY RD. BERTON NC 28358		☐ Delete		{			☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP	ZO, DANA VATERING LANE IWALK CT 06850		☐ Delete	EETY	EET ADDRESS - ST-ZIP			☐ Change	☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 tight my 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 trusteel-grapowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: SALVATORE NUZZO 12704 SCI 6275520									

FILED