

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

DOCUMENT# N99000006067

**FILED**  
**Aug 11, 2004**  
**Secretary of State****Entity Name:** DELRAY BEACH CULTURAL ALLIANCE, INC.**Current Principal Place of Business:**P O BOX 913  
DELRAY BEACH, FL 33447**New Principal Place of Business:**950 NW 9TH ST  
DELRAY BEACH, FL 33444**Current Mailing Address:**P O BOX 913  
DELRAY BEACH, FL 33447**New Mailing Address:**950 NW 9TH ST  
DELRAY BEACH, FL 33444**FEI Number:** 65-0916424**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**CARTER, MELISSA  
51 N SWINTON AVE  
DELRAY BEACH, FL 33483 US**Name and Address of New Registered Agent:**BROWN, JERILYN  
51 N SWINTON AVE  
DELRAY BEACH, FL 33483 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: JERILYN BROWN

08/11/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CARTER, MELISSA  
Address: 51 N SWINTON AVE  
City-St-Zip: DELRAY BEACH, FL 33483

Title: SD ( ) Delete  
Name: ADAMS, GLORIA  
Address: 51 N SWINTON AVE  
City-St-Zip: DELRAY BEACH, FL 33444

Title: T ( ) Delete  
Name: EASTON, SUSAN  
Address: 450 NW 9TH ST  
City-St-Zip: DELRAY BEACH, FL 33444

Title: VP (X) Delete  
Name: HUNTER, LINDA  
Address: 29 SE 4TH AVE  
City-St-Zip: DELRAY BEACH, FL 33444

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

Title: PD (X) Change ( ) Addition  
Name: BROWN, JERILYN  
Address: 51 N SWINTON AVE  
City-St-Zip: DELRAY BEACH, FL 33483

Title: SD (X) Change ( ) Addition  
Name: FERRINGTON, CHARLENE  
Address: PO BOX 3077  
City-St-Zip: DELRAY BEACH, FL 33447

Title: T (X) Change ( ) Addition  
Name: EASTON, SUSAN  
Address: 950 NW 9TH ST  
City-St-Zip: DELRAY BEACH, FL 33444

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: SUE EASTON

T

08/11/2004

Electronic Signature of Signing Officer or Director

Date