2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000102089

FILED Feb 16, 2004

Secretary of State Entity Name: NATURES CHARITY INC. **Current Principal Place of Business: New Principal Place of Business:** 2192NE 61 CT. FORT LAUDERDALE, FL 33308 **Current Mailing Address: New Mailing Address:** 2192NE 61 CT FORT LAUDERDALE, FL 33308 FEI Number: 65-0798446 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: CHALKLEY, MARY ANN 2192NE 61 CT. FORT LAUDERDALE, FL 33308 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition CHALKLEY, MARY ANN CHALKLEY, MARY ANN Name: Name: 2192NE 61 CT. 2192NE 61 CT. Address: Address:

City-St-Zip: FORT LAUDERDALE, FL 33308

Title: () Delete Name:

Address:

City-St-Zip: FORT LAUDERDALE, FL 33308

() Change (X) Addition Name: CHALKLEY, MARK E

Address: 2192 NE 61 CT

Title:

FT LAUDERDALE, FL 33308 City-St-Zip: 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 Statutés. 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARYANN CHALKLEY **PRES** 02/16/2004