## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000131282

Entity Name: NONPROFIT RESOURCE GROUP, INC.

FILED Apr 28, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

517 WEST IDLEWILD #1 208 EAST LAMBRIGHT STREET

TAMPA, FL 33604 TAMPA, FL 33604

Current Mailing Address: New Mailing Address:

517 WEST IDLEWILD #1 208 EAST LAMBRIGHT STREET

TAMPA, FL 33604 TAMPA, FL 33604

FEI Number: 55-0813661 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:

WILHELM, CHARLES W 517 WEST IDLEWILD #1 WILHELM, CHARLES W 208 EAST LAMBRIGHT STREET

TAMPA, FL 33604 TAMPA, FL 33604

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: 04/28/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 WILHELM, CHARLES W

 Address:
 517 WEST IDLEWILD #1

 Name:
 WILHELM, CHARLES W

 Address:
 208 EAST LAMBRIGHT STREET

City-St-Zip: TAMPA, FL 33604 City-St-Zip: TAMPA, FL 33604

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES W. WILHELM PRES 04/28/2004

Electronic Signature of Signing Officer or Director

Date