
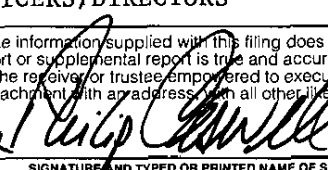


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 15, 2004 8:00 am**  
**Secretary of State**

01-15-2004 90007 049 \*\*\*\*61.25

<b>DOCUMENT # P38218</b> 1. Entity Name <b>THE FRANK STANLEY BEVERIDGE FOUNDATION, INC.</b>					
Principal Place of Business <b>301 YAMATO ROAD, SUITE 1130 BOCA RATON, FL 33431-4929</b>			Mailing Address <b>301 YAMATO ROAD, SUITE 1130 BOCA RATON, FL 33431-4929</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CASWELL, PHILIP 301 YAMATO ROAD, SUITE 1130 BOCA RATON, FL 33431-4929				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be</b> <b>Added to Fees</b>	
<b>Make check payable to</b> <b>Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD		TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CASWELL, PHILIP		NAME	CASWELL, PHILIP	
STREET ADDRESS	301 YAMATO RD. #1130		STREET ADDRESS	301 YAMATO RD., #1130	
CITY-ST-ZIP	BOCA RATON, FL		CITY-ST-ZIP	BOCA RATON, FL 33431	
TITLE	VPT <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LENHART, CAROLE S.		NAME		
STREET ADDRESS	3610 JOE SANCHEZ RD., W		STREET ADDRESS		
CITY-ST-ZIP	PLANT CITY, FL 33565		CITY-ST-ZIP		
TITLE	D <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PALMER, JOSEPH BEVERIDGE		NAME		
STREET ADDRESS	192 MIDDLE RD		STREET ADDRESS		
CITY-ST-ZIP	CENTER SANDWICH, NH 03227		CITY-ST-ZIP		
TITLE	D <input type="checkbox"/> Delete		TITLE	DAC <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GRIGGS, ALFRED L		NAME	GRIGGS, ALFRED L.	
STREET ADDRESS	9 BARRETT PLACE		STREET ADDRESS	9 BARRETT PLACE	
CITY-ST-ZIP	NORTHAMPTON, MA 010602103		CITY-ST-ZIP	NORTHAMPTON, MA 01060-2103	
TITLE	D <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	STECHER, PATSY PALMER		NAME		
STREET ADDRESS	4919 QUEEN VICTORIA RD		STREET ADDRESS		
CITY-ST-ZIP	WOODLAND HILLS, CA 91364		CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SEE ATTACHMENT FOR ADDITIONAL		NAME		
STREET ADDRESS	OFFICERS/DIRECTORS		STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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 that 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 trustee empowered 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 from all other like empowered.					
SIGNATURE: 		Philip Caswell, President		X 1-13-04 561-241-8388	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

Attachment  
#P38218  
44002295

ATTACHMENT TO  
2004 ANNUAL REPORT  
FOR  
THE FRANK STANLEY BEVERIDGE FOUNDATION, INC.

Continuation of Block 10:

TITLE: D  
NAME: BIGUE, CHRISTA PALMER  
STREET ADDRESS: 1120 Persia Avenue  
San Francisco, CA 94112

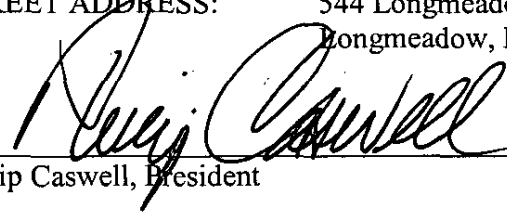
TITLE: DC  
NAME: CASWELL, WARD S.  
STREET ADDRESS: 335 Brookline Street  
Needham, MA 02492

TITLE: D  
NAME: EDDY, LATIMER B.  
STREET ADDRESS: 90 Bridle Path Road  
W. Springfield, MA 01089

TITLE: D  
NAME: PALMER, IAN CAMPBELL  
STREET ADDRESS: 125 Island Drive  
Middletown, RI 02842

TITLE: D  
NAME: STECHER, FREDERICK WILLIAM  
STREET ADDRESS: 2539 Gundry Avenue  
Long Beach, CA 90807

TITLE: D  
NAME: LEARY, CAROL A.  
STREET ADDRESS: 544 Longmeadow Street  
Longmeadow, MA 01106-2212

x   
Philip Caswell, President

  
Date Jan. 13, 2004