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

May 21, 2004 8:00 am DOCUMENT # P38956 Secretary of State 1. Entity Name 05-21-2004 90004 005 ****61.25 THE A.K. RICE INSTITUTE, INCORPORATED Principal Place of Business Mailing Address 19586 TRAILS END TERRACE 19586 TRAILS END TERRACE J4U00146 JUPITER FL 33458 JUPITER FL 33458 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 Applied For 41-1262454 Not Applicable Ζiρ \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 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. 1 am familiar with, and accept the obligations of registered agent. SIGNATURE $\mathbb{C}^{n_{k}}$ Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. П Florida Department of State Due By May 1, 2004 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE ☐ Change Addition WINDERMAN, BARBARA NAME NAME 3206 ABERDEEN WAY STREET ADDRESS STREET ADDRESS HOUSTON TX CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Change Delete 🙀 Addition NOUMAIR, DEBRA A ED.D. NAME MARKE Mary W. Wright 200 W. 79TH ST, #12-G STREET ADDRESS STREET ADDRESS 25 John Andrew Street NEW YORK NY 10024 CITY-ST-ZIP CITY-ST-ZIP Boston, MA 02130 TITLE **X**Delete TITLE ☐ Change **Addition** WRIGHT, MARY W NALAF NAME Marta Frank 25 JOHN ANDREW ST STREET ADDRESS STREET ADDRESS 4 Swan Road BOSTON MA 02130 CITY-ST-ZIP CITY-ST-ZIP Winchester, MA 01890 TITLE ☐ Delete ☐ Change ☐ Addition BAXTER, ROBERT F MD NAME NAME 24632 IVORY CANDE DR. #103 STREET ADDRESS STREET ADDRESS **BONITA SPRINGS FL 34134** CITY-ST-7IP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition WHITE, EMILY ED.D. NAME NAME 275 W. 96TH ST, #21-F STREET ADDRESS STREET ADDRESS NEW YORK NY 10025 CITY-ST-ZIP CITY-ST-ZIP TITLE **X** Addition TITLE ☐ Change Delete MILLER, ROSE S NAME NAME Larry W. Penwell, Ph.D. 1530 GREEN STREET STREET ADDRESS STREET ADDRESS 4102 32nd Road South PHILADELPHIA PA 19130 CITY-ST-ZIP CITY-ST-ZIP

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, with all other like empowered.

12. Thereby 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

Arlington, VA

SIGNATURE

Butual Minderna President

5/13/04 (713) 666-0213

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FILED