

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 06, 2004
Secretary of State**

DOCUMENT# N02000002247

Entity Name: FRIENDS OF THE THINK-TANK, INC.

Current Principal Place of Business:

C/O JACK PERKINS
3916 CASEY KEY ROAD
NOKOMIS, FL 34275

New Principal Place of Business:

Current Mailing Address:

C/O JACK PERKINS
3916 CASEY KEY ROAD
NOKOMIS, FL 34275

New Mailing Address:

FEI Number: 03-0436398 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERKINS, JACK
3916 CASEY KEY ROAD
NOKOMIS, FL 34275

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SEEREY-LESTER, JOHN
Address: 3913 CASEY KEY ROAD
City-St-Zip: NOKOMIS, FL 34275

Title: PD () Delete
Name: PERKINS, JACK
Address: 3916 CASEY KEY ROAD
City-St-Zip: NOKOMIS, FL 34275

Title: STD () Delete
Name: MESSINA, MARIO
Address: 4029 CASEY KEY ROAD
City-St-Zip: NOKOMIS, FL 34275

Title: D () Delete
Name: BODNER, LYNN
Address: 3250 CASEY KEY ROAD
City-St-Zip: NOKOMIS, FL 34275

Title: D () Delete
Name: MORRIS, HARVEY
Address: 3105 CASEY KEY ROAD
City-St-Zip: NOKOMIS, FL 34275

Title: D () Delete
Name: JOHNSON, JUDY
Address: 224 PALMETTO AVENUE
City-St-Zip: OSPREY, FL 34229

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JACK PERKINS

PRES

07/06/2004

Electronic Signature of Signing Officer or Director

_____ Date