2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#765958

FILED Apr 26, 2004 Secretary of State

Entity Name: FLORIDA HIGH SCHOOLS MODEL UNITED NATIONS, INC.

Current Principal Place of Business:			New Principal Place of Business:		
PO BOX 5425 WINTER PARK, FL 327935425 US					
Current Mailing Address:			New Mailing Address:		
1105 W KNOLLWOOD ST TAMPA, FL 336046419 US					
FEI Number:	59-2274688	FEI Number Applied For() FEI Nur	nber Not Appli	cable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Addre				Address of New Registered Agent:	
JOHNSTON, GERALD R 1105 W KNOLLWOOD ST TAMPA, FL 336046419 US					
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:					
	Electror	nic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D (JOHNSTON, G 2331 W HORA TAMPA, FL 33	TIO ST #624	Title: Name: Address: City-St-Zip:	D (X) Change () Addition JOHNSTON, GERALD R 1105 W KNOLLWOOD ST TAMPA, FL 33604	
Title: Name: Address: City-St-Zip:	CM (COOK, THOMA 2331 W HORA TAMPA, FL 33	TIO ST #624	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD (HAYES, JAMIE 314 RACHELLI SANFORD, FL	E AVE #1024	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD (DEMERITT, WI 6409 WESTGA ORLANDO, FL	TE DR #201	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	()) Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition ABREU, JOLIE MRS 2824 RIPTON COURT ORLANDO, FL 32835	
Title: Name: Address: City-St-Zip:	()) Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition BILLINGS, RAEMIL MR P.O. BOX 5727 DELTONA, FL 32728	

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: THOMAS H. COOK CM 04/26/2004

MR. BRIAN SUTLIFF 1540 NORTH LOCKWOOD RIDGE ROAD APARTMENT 129 SARASOTA, FLORIDA, 34237

MS. JUDY HOFFMAN 6312 17TH TERRACE NORTH ST. PETERSBURG, FL, 33710

MR. PHIL HAGEN 6929 WEST UNIVERSITY AVENUE APARTMENT 1H GAINESVILLE, FL, 32607

MR. JOE FAIRCLOTH 3 OCEANS WEST BOULEVARD APARTMENT 4C1 DAYTONA BEACH SHORES, FL, 32118