


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2004 08:00 AM
Secretary of State

DOCUMENT # F03000006441 1. Entity Name THE EAST STROUDSBURG UNIVERSITY FOUNDATION, INC.	
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Principal Place of Business 200 PROSPECT STREET EAST STROUDSBURG, PA 18301	Mailing Address 200 PROSPECT STREET EAST STROUDSBURG, PA 18301
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DO NOT WRITE IN THIS SPACE



02122004 No Chg-NP CR2E037 (10/03)

4. FEI Number 22-2826714	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MERRING, RICHARD 1154 ANDREW STREET ENGLEWOOD, FL 34224-4502	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

U00000077635
 03/05/04-80051-008 70.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C KEARN, ROBERT A 305 LIGGETT BLVD. PHILLIPSBURG, NJ 08865
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC RUBIN, BARTH THE BUDGET MOTEL, I-80, EXIT 308 EAST STROUDSBURG, PA 18301
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SANDERS, ISAAC 3030 HAMILTON EAST STROUDSBURG, PA 18360
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S EL-CHAAR, KAREN 450 MOUNTAIN PARK ROAD ALLENTOWN, PA 18103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MENIO, GREGORY J 92 BRINLEIGH DRIVE EAST STROUDSBURG, PA 18301
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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, with all other, like empowered.

SIGNATURE: Isaac W. Sanders Isaac W. Sanders 2-11-04 (570) 422-3333
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #