


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 17, 2004 8:00 am
Secretary of State

05-17-2004 90021 039 ****61.25

DOCUMENT # N93000000289

1. Entity Name
 100 DEPUTIES, 100 KIDS, INC.



Principal Place of Business
 123 W. INDIANA AVE.
 DELAND, FL 32720 US

Mailing Address
 123 W. INDIANA AVE.
 DELAND, FL 32720 US

24076411



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

03072003 Chg-NP CR2E037 (10/03)

City & State

4. FEI Number
 59-3162330

Applied For
 Not Applicable

Zip Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

EDWARDS, JUDITH R
 123 W INDIANA AVE
 DELAND, FL 32721

7. Name and Address of New Registered Agent

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

Filing Fee is \$61.25
Due by September 8, 2004

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	EDWARDS, JUDITH R	
STREET ADDRESS	123 W. INDIANA AVE.	
CITY-ST-ZIP	DELAND, FL 32721	
TITLE	D	<input type="checkbox"/> Delete
NAME	VOSS, LORETTA	
STREET ADDRESS	123 W. INDIANA AVE.	
CITY-ST-ZIP	DELAND, FL 32721	
TITLE	D	<input type="checkbox"/> Delete
NAME	VANCINI, LYNDA	
STREET ADDRESS	123 W. INDIANA AVE.	
CITY-ST-ZIP	DELAND, FL 32721	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HINSHAW, DAVE	
STREET ADDRESS	123 W INDIANA AVE	
CITY-ST-ZIP	DELAND, FL 32721	
TITLE	D	<input type="checkbox"/> Delete
NAME	LEE, WILLIAM	
STREET ADDRESS	123 W INDIANA AVE	
CITY-ST-ZIP	DELAND, FL 32721	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jim Morgan	
STREET ADDRESS	123 W. Indiana Avenue	
CITY-ST-ZIP	DeLand, FL 32721	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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, with all other titles empowered.

SIGNATURE: *Judith R. Edwards*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 13, 2004 (386) 736-5989
Date Daytime Phone #