

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2009
Secretary of State

DOCUMENT# F99000001740

Entity Name: SUCCESS FOR ALL FOUNDATION, INC.

Current Principal Place of Business:

200 WEST TOWSONTOWN BLVD
BALTIMORE, MD 212045200

New Principal Place of Business:

Current Mailing Address:

200 WEST TOWSONTOWN BLVD
BALTIMORE, MD 212045200

New Mailing Address:

FEI Number: 52-2061820 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 US

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: CD () Delete
Name: SLAVIN, ROBERT E
Address: 200 WEST TOWSONTOWN BLVD
City-St-Zip: BALTIMORE, MD 21204

Title: PD () Delete
Name: MADDEN, NANCY A
Address: 200 WEST TOWSONTOWN BLVD
City-St-Zip: BALTIMORE, MD 21204

Title: CFO () Delete
Name: MORIN, ROGER A
Address: 200 WEST TOWSONTOWN BLVD
City-St-Zip: BALTIMORE, MD 21204

Title: SD () Delete
Name: ARNHOLZ, JOHN
Address: 200 WEST TOWSONTOWN BLVD
City-St-Zip: BALTIMORE, MD 21204

Title: D () Delete
Name: WILLIAMS, MYRNA
Address: 200 WEST TOWSONTOWN BLVD
City-St-Zip: BALTIMORE, MD 21204

Title: D () Delete
Name: MCGUIRE, KENT
Address: 200 WEST TOWSONTOWN BLVD
City-St-Zip: BALTIMORE, MD 21204

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 exemption stated in Chapter 119, 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: ROGER A. MORIN

CFO

01/08/2009

Electronic Signature of Signing Officer or Director

Date