# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 28, 2005 08:00 AM**
**Secretary of State**

DOCUMENT # N00000002512

1. Entity Name
CARBON FAMILY FOUNDATION, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 3823 DOVE STREET<br>SAN DIEGO, CA 92103 | 3823 DOVE STREET<br>SAN DIEGO, CA 92103 |

**DO NOT WRITE IN THIS SPACE**

03222005 No Chg-NP CR2E037 (10/03)

4. FEI Number
86-0991034
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

RUDOLF & HOFFMAN PA
615 NE 3RD AVENUE
FORT LAUDERDALE, FL 33304

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2005

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

10. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE | PS |
| NAME | GORRELL, KIRSTEN L |
| STREET ADDRESS | 3823 DOVE STREET |
| CITY-ST-ZIP | SAN DIEGO, CA 92103 |
| TITLE | VP |
| NAME | GETZ, LISEL |
| STREET ADDRESS | 2135 CECELIA TERR |
| CITY-ST-ZIP | SAN DIEGO, CA 92110 |
| TITLE | D |
| NAME | GETZ, PAUL |
| STREET ADDRESS | 2135 CECELIA TERR |
| CITY-ST-ZIP | SAN DIEGO, CA 92110 |
| TITLE | D |
| NAME | MATT, KRISTEN |
| STREET ADDRESS | 3823 DOVE STREET |
| CITY-ST-ZIP | SAN DIEGO, CA 92103 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

U00000279124
03/28/05-80053-022 61.25

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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:** Kirsten Gorell KIRSTEN L. GORELL 3/22/05 (619)602-7656
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #