

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001177

FILED
Mar 23, 2011
Secretary of State

Entity Name: THE EAGLES' WINGS FOUNDATION, INC.

Current Principal Place of Business:

375 POSSUM PASS
W. PALM BCH, FL 33413

New Principal Place of Business:

Current Mailing Address:

375 POSSUM PASS
W. PALM BCH, FL 33413

New Mailing Address:

FEI Number: 65-1089571

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIS, SCOTT P
375 POSSUM PASS
W. PALM BCH, FL 33413 US

Name and Address of New Registered Agent:

LEWIS, CAROL J
375 POSSUM PASS
W. PALM BCH, FL 33413 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: CAROL J. LEWIS

03/23/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: STEPP, WILLIAM REV
Address: 1105 LAKE CLARKE DRIVE
City-St-Zip: W. PALM BCH, FL 33406

Title: D
Name: LEWIS, SCOTT P
Address: 375 POSSUM PASS
City-St-Zip: W. PALM BCH, FL 33413

Title: D
Name: ROTHSTEIN, MURRAY
Address: 3390 S. OCEAN BLVD., -#302
City-St-Zip: PALM BEACH, FL 33480

Title: D
Name: LESINGER, JOHN C
Address: 200 DESOTA RD.
City-St-Zip: W. PALM BCH, FL 33405

Title: D
Name: PERRY, WILLIAM
Address: 780 SW 31ST STREET
City-St-Zip: PALM CITY, FL 34990

Title: D
Name: AHMED, MUJAHED M.D.
Address: 2669 FOREST HILL BLVD. - SUITE 100
City-St-Zip: WEST PALM BEACH, FL 33406

I hereby 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 all other like empowered.

SIGNATURE: CAROL J. LEWIS

S

03/23/2011

Electronic Signature of Signing Officer or Director

Date