

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006537

FILED
Jan 16, 2009
Secretary of State

Entity Name: DISC VILLAGE FOUNDATION, INC.

Current Principal Place of Business:

3333 W. PENSACOLA STREET
SUITE 330
TALLAHASSEE, FL 32304

New Principal Place of Business:

Current Mailing Address:

3333 W. PENSACOLA STREET
SUITE 330
TALLAHASSEE, FL 32304

New Mailing Address:

FEI Number: 59-3746415 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLK, THOMAS K
3333 W. PENSACOLA STREET
SUITE 330
TALLAHASSEE, FL 32304 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: D () Delete
Name: ALOI, JOSEPH J
Address: 524 APPELYARD DR.
City-St-Zip: TALLAHASSEE, FL 32304

Title: D () Delete
Name: LIANG, JEFFREY S
Address: PO BOX 12121
City-St-Zip: TALLAHASSEE, FL 32317

Title: D () Delete
Name: PATTERSON, TODD
Address: 2700 CLINE ST.
City-St-Zip: TALLAHASSEE, FL 32312

Title: CEO () Delete
Name: OLK, THOMAS K
Address: 3333 W. PENSACOLA ST., STE 300
City-St-Zip: TALLAHASSEE, FL 32304

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:

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: THOMAS OLK

CEO

01/16/2009

Electronic Signature of Signing Officer or Director

_____ Date